



SEAWORLD • BUSCH GARDENS
CAMP

TEXAS SLEEPOVER CAMP PARTICIPANT FORMS (ADULT)

You have requested the opportunity to participate in a SeaWorld Camp. Please complete, sign, and return the attached forms to the appropriate park at least five weeks before your camp session.

SeaWorld Texas
ATTN: SeaWorld Sleepovers
10500 Sea World Drive
San Antonio, Texas 78251

- Adult Information, Insurance Information, Medication and Health History
- Consent and Release for Medical Treatment
- Photo Release
- Release of Liability, Voluntary Assumption of Risk, Indemnity Agreement

The information on these forms will help us provide appropriate care if or when necessary. Adult campers may complete all information.

Any changes to information on these forms should be given to camp staff upon arrival to camp. Please provide us with complete information so the staff can be aware of all needs.

CAMPERS CANNOT BEGIN PROGRAM ACTIVITIES

UNTIL COMPLETED, SIGNED FORMS ARE ON FILE

CAMPER INFORMATION AND HEALTH HISTORY

Last Name	First/Middle Name	M/F
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Birth date	Camp date(s)	Phone	Cell Phone
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Home address	City	State	Zip
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Emergency Contact	Phone	Relationship
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Are you covered by family medical/hospital insurance? Yes No

If so, indicate carrier or plan name _____ Group # _____

Name of insured _____ Relationship to participant _____

Policyholder insurance ID number _____

Name of family physician _____ Phone _____

Does the camper have any **Allergies** (including food, nuts, insect (bee) stings, hay fever, penicillin or other drugs, animal hair/fur etc.), **Asthma Disease** (Hepatitis, Measles, heart disease/defect, epilepsy, diabetes etc.), **Dietary Restrictions** Please list any special needs your camper requires (vegetarian, gluten-free, dairy-free, etc.) or **Other Conditions** (Migraines, nosebleeds, bed-wetting, sleepwalking, behavioral etc.). If so, please explain in the space provided below.

CONSENT AND RELEASE FOR MEDICAL TREATMENT (ADULT)

In consideration of my attendance and participation at the Sea World Adventure Camp and all associated activities and outings (collectively, "the Camp"), I, _____, (camper) execute this Consent for Medical Treatment (the "Consent") with SEA WORLD OF TEXAS LLC, all parents, subsidiaries, related and affiliated entities including but not limited to SeaWorld Parks & Entertainment, Inc., and their officers, members, directors, partners, shareholders, employees, agents, insurers, successors and assigns (collectively, "SEA"). I understand and agree that this Consent shall be binding on me as well as all of my representatives, executors, heirs, next of kin, administrators, beneficiaries, successors and assigns. I represent that I am of sound mind and have the legal capacity to enter into this agreement.

Beginning on the first day of my attendance and/or participation in the Camp and continuing from day to day throughout the time I am present at, attend, and/or participate in the Camp, I hereby authorize any licensed physician, emergency medical technician, paramedics, nurses, hospital or other medical or health care facility or provider ("Medical Provider") to provide medical care to me for any illness, injury, and/or condition that occurs, manifests or arises at the Camp. I further authorize any such Medical Provider to perform all procedures or services deemed medically advisable to treat or relieve, or to attempt to treat or relieve, any illness, injury, and/or condition. I acknowledge that there is a risk of complications and unforeseen consequences in any medical treatment. **IN CONSIDERATION FOR ME BEING ALLOWED TO PARTICIPATE IN THE CAMP, I, AND ALL OTHERS ASSERTING RIGHTS BY, THROUGH, UNDER OR ON BEHALF OF ME DO HEREBY RELEASE, ACQUIT AND HOLD HARMLESS SEA FROM ANY AND ALL CLAIMS AND/OR DAMAGES ARISING FROM OR IN ANY WAY RELATED TO ANY MEDICAL TREATMENT, MEDICATION AND/OR HEALTH CARE ADMINISTERED TO ME, INCLUDING THE TIMING AND MANNER IN WHICH ANY SUCH TREATMENT, MEDICATION OR CARE IS ADMINISTERED REGARDLESS OF WHETHER SUCH CLAIMS AND/OR DAMAGES WERE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OR ANY OTHER ACT, OMISSION, FAULT OR CONDUCT OF SEA.** I acknowledge that no warranty is being made as to the result of any medical treatment. I agree that any health history provided by me is correct to the best of my knowledge. I certify that I am in good health and do not have any health or mental / physical impairments or conditions that would be aggravated by my attendance or participation at the Camp or that make such attendance or participation unsafe or otherwise inappropriate for me and/or other campers. A copy of this Consent may be used in place of the original.

I acknowledge and agree that this Agreement is intended to be as broad and inclusive as permitted by law. If any provision is invalidated or unenforceable, the remaining terms of the Agreement shall not be affected thereby but shall be valid and enforceable to the fullest extent permitted by law. The invalid provision shall automatically be replaced by a substitute provision which is valid and as nearly as possible maintains the same purposes and intention of the invalidated or unenforceable provision. I acknowledge and agree that this Agreement shall be interpreted in accordance with the laws of the State of Texas.

I HAVE READ AND UNDERSTAND THE FOREGOING AND ACCEPT AND AGREE TO ITS TERMS.

Signature _____ Date: _____

Printed Name: _____

PHOTO RELEASE

In consideration of being permitted to participate in the Sea World Camps (the "Camp"), I do hereby grant SEA WORLD OF TEXAS LLC, all parents, subsidiaries, all related and affiliated entities, and their officers, directors, members, partners, shareholders, employees, agents, successors and assigns including but not limited SeaWorld Parks & Entertainment, Inc., (collectively referred to as "SEA"), the irrevocable right and permission to photograph or otherwise record me in connection with the Camp, and to use any such photograph or recording ("Photograph") for all purposes, including advertising and promotional purposes, in any manner in any and all media now or hereafter known, in perpetuity throughout the world, without restriction as to alteration. I waive any right to inspect or approve the use of the Photograph, and acknowledge and agree that the rights granted by this Release are without compensation of any kind.

I acknowledge and agree that I have no right, title or interest in the Photographs and agree that such Photographs and the copyright therein are the exclusive property of SEA. I hereby release and discharge SEA from any and all claims and demands arising out of or in connection with the use of the Photographs, including but not limited to any and all claims for invasion of privacy or right of publicity.

I represent and agree that I have the legal capacity and authority to act on my own behalf. This release shall be binding upon me and/or my heirs, executors, representatives, next of kin, beneficiaries, administrators, successors and assigns.

I HAVE READ AND UNDERSTAND THE FOREGOING RELEASE AND ACCEPT AND AGREE TO ITS TERMS AND SIGN IT VOLUNTARILY.

Signature: _____ Date: _____

Printed Name: _____

Decline use of Photograph Date _____

RELEASE OF LIABILITY, VOLUNTARY ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

Thank you for participating in the Sea World Camps (hereinafter "Camp"). In consideration of and as a condition for your participation in the Camp, you hereby accept the following terms and voluntarily enter into this Release of Liability, Voluntary Assumption of Risk and Indemnity Agreement ("Release"). Please carefully read and consider the terms of this Agreement. Sign in the space at the end to indicate your understanding and acceptance of such terms and your entry into the Agreement.

1. I, _____, sign this Agreement on behalf of myself and all others asserting rights by, through, under or on behalf of me. I acknowledge receipt of written materials and instructions relating to the Camp and assert that I have had an opportunity, prior to enrolling in the Camp, to review these materials which include but are not limited to: **Sleepover Confirmation Packet**. As a condition of my attendance and participation at the Camp, I agree that I will abide by the policies of the Camp and instructions of Camp staff. I understand that the Camp has the right to refuse or remove any participant who fails to obey such policies or instructions.
2. I certify that I am in good health and do not have any health or mental / physical impairments or conditions that would be aggravated by my attendance or participation at the Camp or that make such attendance or participation unsafe or otherwise inappropriate for myself, the animals at the Camp, or other participants. I further certify that I currently do not have upper respiratory disease, including asthma or illness (e.g., colds, flu, etc.), I am not on medication that suppresses immune function or has possible side effects that would interfere with the Camp, and that I do not have open sores, open wounds, cuts, abrasions, skin irritations or other outward signs of illness.
3. I understand that attendance and participation at the Camp may include riding roller coasters and other theme park rides and activities which may involve high speeds and exposure to certain gravity forces, swimming, snorkeling, kayaking, zip lines, rope climbs, play areas, ball games, carrying heavy equipment, continuous walking, vehicle transportation to and from activities, being in proximity of or interacting with, feeding and coming in physical contact with birds, reptiles, and primates, large felines, manatees, whales, dolphins, and other land or marine animals. I understand that there are inherent **RISKS** involved in these activities, including but not limited to scrapes, bites, cuts, bruises and/or more serious injuries or illnesses such as bodily injury, even death. I have voluntarily enrolled in the Camp and agree to ASSUME ALL RISKS, known and unknown, of personal injuries, possible death and damage to or loss of property stemming from attendance and participation at the Camp, transportation to and from the Camp or Camp activities, and presence at the camp site, the site of any Camp activities, or at any location with the Sea World park while attending the Camp.
4. I agree to **RELEASE SEA WORLD OF TEXAS LLC, all parents, subsidiaries, related and affiliated companies, including but not limited to SeaWorld Parks & Entertainment, Inc. and their officers, members, directors, shareholders, employees, agents, successor and assigns (the "Released Parties") from any and all claims, losses, demands, damages, expenses, lawsuits, causes of action and judgments, whether foreseen or unforeseen, known or unknown, present or future, resulting from, arising out of or in any way connected with my participation in the Camp including but not limited to, any claims for personal injuries, including death, illnesses and/or damage to or loss of personal property, EVEN IF CAUSED IN WHOLE OR IN PART BY THE PRESENT OR FUTURE NEGLIGENCE, FAULT, STRICT PRODUCT LIABILITY, BREACH OF CONTRACT OR OTHER ACT, CONDUCT OR STATUS OF ANY OF THE RELEASED PARTIES.**

5. I further agree to INDEMNIFY AND DEFEND THE RELEASED PARTIES from and against any claims, actions, damages, demands, costs, expenses (including attorneys' fees) or lawsuits, whether foreseen or unforeseen, present or future, known or unknown, that I may have or assert as arising from attendance or participation (or the refusal of permission to attend or participate) at the Camp, **EVEN IF CAUSED IN WHOLE OR IN PART BY THE PRESENT OR FUTURE NEGLIGENCE, FAULT, STRICT PRODUCT LIABILITY, BREACH OF CONTRACT OR OTHER ACT, CONDUCT OR STATUS OF ANY OF THE RELEASED PARTIES.** I understand and agree that this indemnity obligation includes any claims, actions, damages or lawsuits brought by or on behalf of my child/ward, including those for personal injuries, illness or damage to or loss of property arising from attendance or participation (or refusal of permission to attend or participate) at the Camp.
6. I acknowledge and agree that this Agreement is intended to be as broad and inclusive as permitted by law. If any provision is invalidated or unenforceable, the remaining terms of the Agreement shall not be affected thereby but shall be valid and enforceable to the fullest extent permitted by law. The invalid provision shall automatically be replaced by a substitute provision which is valid and as nearly as possible maintains the same purposes and intention of the invalidated or unenforceable provision.
7. I acknowledge and agree that this Agreement shall be interpreted in accordance with the laws of the State of Texas and that any dispute arising from the enforceability and/or interpretation of this Release shall be filed in a court of competent jurisdiction in Texas.
8. I agree that this Release shall be binding upon me, my heirs and all others asserting rights, by through, under or on my behalf.

I AM OF AT LEAST 18 YEARS OF AGE, AM OF SOUND MIND, HAVE READ AND UNDERSTAND THE FOREGOING AND ACCEPT AND VOLUNTARILY AGREE TO ITS TERMS.

Signature: _____ Date: _____

Printed Name: _____

Address: _____