



Historic Indian Agency House  
**Scouts BSA Historic Trails Weekend Registration Form**  
September 8-10, 2023

Scout Group: \_\_\_\_\_

Contact Person's Full Name: \_\_\_\_\_

Contact Person's Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Number of Scouts Participating: \_\_\_\_\_ Number of Chaperones: \_\_\_\_\_

**PLEASE CAREFULLY READ THE FOLLOWING:**

Scout leaders / chaperones are responsible for directly supervising their own Scouts at all times, including during activities led by Historic Indian Agency House staff and volunteers. Scout leaders / chaperones are responsible for overseeing the health and safety of the Scouts under their care. All activities are at-your-own-risk. Scout leaders / chaperones are responsible for making sure that meals, bottled water, and personal needs of the Scouts are provided for throughout the day. Scout leaders / chaperones will ensure that Scouts follow the rules, use good etiquette, leave no trace, and treat the property and others with care and respect. Any activities undertaken on or around water (Fox River / Portage Canal) will not be supervised by lifeguards. Scout leaders / chaperones should recognize the risks, take all reasonable safety precautions, and assume responsibility for the welfare of their own group on and around water. I understand that HIAH may post photos from the event on Social media, use them for advertising purposes, and/or submit them with news releases. It is the policy of HIAH NOT to post the full names of minors along with photos on the internet. By signing below, I confirm that I have shared this information with the parents/legal guardians of the Scouts who will be participating in this event, as well as participating Scout leaders/chaperones, and they all agree and give their consent for their own and/or their child(ren)'s participation. My signature certifies that each parent/guardian/participant further agrees to the following statement: IN CONSIDERATION FOR MY PARTICIPATION IN THE PROGRAM, ON BEHALF OF MYSELF AND MY BENEFICIARIES, SUCCESSORS, ASSIGNS, AND MY ESTATE, TO THE FULLEST EXTENT ALLOWED BY LAW, I HEREBY WAIVE, RELEASE, FOREVER DISCHARGE, INDEMNIFY, AND HOLD HARMLESS THE HISTORIC INDIAN AGENCY HOUSE / NATIONAL SOCIETY OF THE COLONIAL DAMES OF AMERICA IN THE STATE OF WISCONSIN ("OWNER"), AND ALL OFFICERS, MEMBERS, MANAGERS, EMPLOYEES, AND AGENTS OF OWNER (COLLECTIVELY, THE "RELEASED PARTIES"), FROM ANY AND ALL LIABILITY, DAMAGES, LOSSES, COSTS, FEES, EXPENSES, CLAIMS, AND CAUSES OF ACTION (INCLUDING, WITHOUT LIMITATION, FOR ALL REASONABLE ATTORNEYS' FEES AND COSTS INCURRED IN ENFORCING THIS WAIVER AND RELEASE IN THE EVENT THAT I DO SUE ANY RELEASED PARTIES) IN RESPECT OF ANY INJURY OR ILLNESS (WHETHER MENTAL, PHYSICAL, PSYCHOLOGICAL, OR EMOTIONAL), LOSS OF LIFE, OR ACCIDENT OF ANY KIND OR NATURE WHATSOEVER, WHETHER KNOWN OR UNKNOWN, ARISING FROM OR IN CONNECTION WITH, IN ANY MANNER, PARTICIPATION IN THE PROGRAM, INCLUDING, WITHOUT LIMITATION, FROM ANY NEGLIGENCE OR OTHER FAULT OF ANY RELEASED PARTIES.

As a recognized representative of the Scout unit listed above, I have read this form carefully, and all participating parties and their parents/guardians if under the age of 18 agree to its stipulations.

\_\_\_\_\_  
Signature Date

**Please scan and email OR postal mail this form to: [historicindianagencyhouse@gmail.com](mailto:historicindianagencyhouse@gmail.com) | Historic Indian Agency House, 1490 Agency House Road, Portage, WI 53901.**

We look forward to a fun and educational weekend with your group!