ACTIVITY CONSENT AND RELEASE AND APPROVAL BY PARENTS OR LEGAL GUARDIAN

| This consent, release and approval is for participation in Hyrum, Utah Stake' | | | | |
|---|----------------|---------------|----------------|--|
| 2022 Trek and r | elated activit | ies ("Trek"). | | |
| | | | | |
| Last name of participant | | First name | Middle initial | |
| r. r. | r | | | |
| Date of Birth | Age duri | ng activity | | |

I understand that participation in Trek involves the risk of personal injury, including death, due to the physical, mental, and emotional challenges associated with Trek. (Additional information about Trek may be obtained from Hyrum Stake leaders.) I also understand that participation in Trek is entirely voluntary and requires participants to follow instructions and abide by any standards or rules provided.

In case of an emergency involving my child, I understand that efforts will be made to contact me. In the event I cannot be reached, permission is hereby given to the medical provider to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for my child. Medical providers are authorized to disclose protected health information to the adult in charge and/ or any physician or health care provider involved in providing medical care to the participant. Protected Health Information/Confidential Health Information (PHI/CHI) under the Standards for Privacy of Individually Identifiable Health Information, 45 C.F.R. §§160.103, 164.501, etc. seq., as amended from time to time, includes examination findings, test results, and treatment provided for purposes of medical evaluation of the participant, follow-up and communication with the participant's parents or guardian, and/or determination of the participant's ability to continue in the Trek activities.

With appreciation of the dangers and risks associated with Trek, including preparations for and transportation to and from the Trek, on my own behalf and/or on behalf of my child, I hereby fully and completely release and waive any and all claims for personal injury, death, or loss that may arise against the land owner, Harold Selman Sheep Co., LLC, Brett Selman, Fred Selman, Laura Selman, Harold Selman, Inc., Trek coordinators, and all employees, volunteers, related parties, or other organizations associated with any Trek program or activity.

NOTE: The Church of Jesus Christ of Latter-Day Saints and its Trek leaders and organizers cannot continually monitor compliance of program participants or any limitations imposed upon them by parents or medical providers. List any restrictions imposed on a child participant in connection with Trek below and counsel your child to comply with those restrictions.

| List participant restrictions, if any: | |
|--|--|
| Date: | |
| Printed name of legal guardian (1) | Printed name of legal guardian (2) |
| Signature of legal guardian (1) | Signature of legal guardian (2) |
| Telephone number of legal guardian (1) | Telephone number of legal guardian (2) |