

CONSENT, ASSUMPTION OF RISK, WAIVER, AND INDEMNITY AGREEMENT
EWU Challenge Course



For and in consideration of my child being permitted to participate in the Eastern Washington University Challenge Course Program, I voluntarily agree to the following terms and conditions:

- 1. I certify that I have read this document, understand its provisions, and agree to its terms, which constitute legally binding consent, assumption of risk, waiver of claims, and indemnity for my child's participation in the EWU Challenge Course.
2. I acknowledge that my child's participation is voluntary. I also agree that for the purpose of this agreement, "PROGRAM" includes participation in any EWU Challenge Course and related activities. I am fully aware that the PROGRAM is not required or related to the fulfillment of any obligations toward obtaining a degree or certificate from EWU.
3. I understand and acknowledge that the PROGRAM includes some inherent and dangerous risks that could result in harm, loss, damage, physical or emotional injury, illness, or death. Risks include, but are not limited to, falling, slipping, tripping, muscle or skeletal injuries, collisions, and exposure.
4. I further understand and acknowledge that the PROGRAM involves inherently dangerous activities regardless of safety precautions to reduce the risk. The PROGRAM involves rigorous physical activities including warm-ups, group activities, trust falls, low and high course elements, and climbing and also involves working with cables, ropes, obstacles, logs, wooden boards, blocks, and other equipment/systems, which provide different challenges for the participants. I voluntarily choose to allow my child to participate in the PROGRAM with full knowledge that the activities may be hazardous.
5. I understand that the degree and extent of participation remains my child's choice, based on what my child can comfortably and willingly do. I understand that a philosophy of "Challenge By Choice" has been adopted by the EWU Challenge Course Program to ensure my child's complete control of their own level of participation. I further understand that is my child's responsibility to inform the group of their choices, and tell the group if they perceive pressure to participate.
6. I will hold EWU, its employees, volunteers, and agents harmless from any and all liability, actions, causes of action, debts, claims, and all demands arising out of or related to any loss, damage, or injury, including death, that may be sustained by my child, myself, or any property belonging to my child, while participating in the PROGRAM or any activities related to the PROGRAM. This agreement shall serve as a release and discharge of EWU for any and all liability arising out of or related to the PROGRAM on behalf of my child, myself, my heirs, assigns, or other successors in interest. I agree to indemnify EWU for all loss, damage and expense of any kind or character arising out of injury, death, damage, or loss due to my child's participation in the PROGRAM.
7. I certify that my child is in good health and has no physical, medical, mental or emotional impairments, conditions or concerns that might jeopardize or affect my child's safety, or the safety of others, related to my child's participation in the PROGRAM.
8. Neither EWU, nor their employees/agents serve as guardians or insurers of my child's safety. EWU does not provide any special insurance for my child's protection, and it is my responsibility to obtain any appropriate insurance. I agree that any and all expenses arising from an accident or injury to my child or my property, including but not limited to, emergency transport, emergency medical services, medical treatment, and damage or loss to property are my responsibilities.
9. I agree to notify the supervising instructor/staff member of any existing medical condition or medication that could affect my child's ability to fully participate in the PROGRAM. In the event that any medical attention is needed and I am unable to provide consent on my child's behalf, I consent to emergency medical treatment and grant EWU and its agents full authority to take whatever actions they may consider to be warranted under the circumstances concerning my child's health and safety. This includes, but is not limited to, the authority and permission to arrange transportation, approval of a hospital, medical treatment facility, and/or health care provider to provide medical exams, testing, medical treatment, and any medical procedures immediately necessary and advisable in the interest of my child's health and well-being, all at my expense.

By my signature below, I certify I am the legal parent or guardian of the named child, am over the age of 18 and legally competent to sign this form. I certify that I have completely read this document, understand its provisions, and voluntarily accept its terms which constitute legally binding consent, assumption of risk, waiver of claims, and indemnity for my child's participation in the EWU Challenge Course Program.

Signature _____ Date _____
Printed Name _____ Child's Name and Date of Birth _____
Emergency Contact Name _____ Emergency Contact Phone Number _____

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EWU Challenge Course



For and in consideration of being permitted to participate in the Eastern Washington University Challenge Course Program, Participant voluntarily agrees to the following terms and conditions:

- 1. I certify that I have read this document, understand its provisions, and agree to its terms, which constitute legally binding consent, assumption of risk, waiver of claims, and indemnity for participating in the EWU Challenge Course Program.
2. I acknowledge that my participation is voluntary. I also agree that for the purpose of this agreement, "PROGRAM" includes participation in any EWU Challenge Course and related activities. I am fully aware that the PROGRAM is not required or related to the fulfillment of any obligations toward obtaining a degree or certificate from EWU.
3. I understand and acknowledge that the PROGRAM includes some inherent and dangerous risks that could result in harm, loss, damage, physical or emotional injury, illness, or death. Risks include, but are not limited to, falling, slipping, tripping, muscle or skeletal injuries, collisions, and exposure.
4. I further understand and acknowledge that the PROGRAM involves inherently dangerous activities regardless of safety precautions to reduce the risk. The PROGRAM involves rigorous physical activities including warm-ups, group activities, trust falls, low and high course elements, and climbing and also involves working with cables, ropes, obstacles, logs, wooden boards, blocks, and other equipment/systems, which provide different challenges for the participants. I voluntarily choose to participate in the PROGRAM with full knowledge that the activities may be hazardous.
5. I understand that the degree and extent of participation remains my choice, based on what I can comfortably and willingly do. I understand that a philosophy of "Challenge By Choice" has been adopted by the EWU Challenge Course Program to ensure my complete control of my own level of participation. I further understand that is my responsibility to inform the group of my choice, and tell the group if I perceive pressure to participate.
6. I will hold EWU, its employees, volunteers, and agents harmless from any and all liability, actions, causes of action, debts, claims, and all demands arising out of or related to any loss, damage, or injury, including death, that may be sustained by myself, or any property belonging to me, while participating in the PROGRAM or any activities related to the PROGRAM. This agreement shall serve as a release and discharge of EWU for any and all liability arising out of or related to the PROGRAM on behalf of myself, my heirs, assigns, or other successors in interest. I agree to indemnify EWU for all loss, damage and expense of any kind or character arising out of injury, death, damage, or loss due to my participation in the PROGRAM.
7. I certify that I am in good health and have no physical, medical, mental or emotional impairments, conditions or concerns that might jeopardize or affect my safety, or the safety of others, related to my participation in the PROGRAM.
8. Neither EWU, nor their employees/agents serve as guardians or insurers of my safety. EWU does not provide any special insurance for my protection, and it is my responsibility to obtain any appropriate insurance. I agree that any and all expenses arising from an accident or injury to myself or my property, including but not limited to, emergency transport, emergency medical services, medical treatment, and damage or loss to property are my responsibilities.
9. I agree to immediately notify the supervising instructor/staff member of any existing medical condition or medication that could affect my ability to fully participate in the PROGRAM. In the event that any medical attention is needed and I am unable to provide consent on my own behalf, I consent to emergency medical treatment and grant EWU and its agents full authority to take whatever actions they may consider to be warranted under the circumstances concerning my health and safety. This includes, but is not limited to, the authority and permission to arrange/provide transportation, approval of a hospital, medical treatment facility, and/or health care provider to provide medical exams, testing, medical treatment, and any medical procedures immediately necessary and advisable in the interest of my health and well-being, all at my expense.

By my signature below, I certify that I am over the age of 18 and legally competent to sign this form. I certify that I have completely read this document, understand its provisions, and voluntarily accept its terms which constitute legally binding consent, assumption of risk, waiver of claims, and indemnity for participating in the EWU Challenge Course Program.

Signature Date
Printed Name Date of Birth
Emergency Contact Name Emergency Contact Phone Number