

Florida Atlantic University
Outdoor Adventures
Challenge Course
Informed Consent and Release of Liability

I, _____, hereby acknowledge that I am solely responsible for my present health and fitness and my ability to participate in strenuous activity. I will participate in all challenge course activities, except for those that I elect to forego due to any present health or physical limitations. Should an accident or emergency occur that renders me unable to communicate, I hereby give permission to the medical providers selected by FAU Campus Recreation to hospitalize and/or secure proper treatment for me. FAU Campus Recreation reserves the right to limit participation in its programs based on medical, safety, or other reasons.

In agreeing to participate at the Florida Atlantic University (FAU) Challenge Course program, I may take part in adventurous activities. These activities may include, but are not limited to group development and challenge course activities. I recognize certain risks and dangers exist in these activities. These risks include, but are not limited to: loss or damage of personal property; mental or emotional distress; injury or fatality due to tripping or other hazards, falling from heights, allergic reactions to foods, flora or insects, exposure to temperature extremes or inclement weather, sun hazards, and equipment failure. I acknowledge that my participation is voluntary. I have had ample time to read and understand this Informed Consent & Release. I have had the opportunity to ask any questions before participating.

I have read and understand the risks listed above and agree to take an active part to protect myself and my fellow participants during the activity. I also understand that I should participate at a level and a pace that I am physically and emotionally prepared for and to not attempt activities that are above my skill level. I have also informed the staff of any medical conditions (including but not limited to pregnancy, heart conditions, back conditions, diabetes, allergies, asthma, epilepsy, recent or reoccurring injuries or surgeries) and any other factors which might interfere with my ability to safely participate, or that might aid medical responders in the event I am injured. I understand and agree that if I am allowed to participate after disclosing such conditions or factors, that I assume the risk of same and am not relying on anyone at FAU to handle or manage such conditions or factors in the event a situation should arise. If I am injured, I will immediately alert staff to the situation.

It is the sole responsibility of each participant to participate only in those activities for which he or she has the prerequisite skills, qualifications, preparations, and training. The undersigned acknowledges that FAU does not warrant or guarantee in any respect the competency or mental or physical condition of any facilitator or individual participant in any outdoor program or recreational activity. I acknowledge that I am solely responsible for any hospital or other costs arising out of any bodily injury or property damage sustained through my participation in the challenge course, and that I am solely responsible for maintaining adequate health and accident insurance coverage for such costs.

The undersigned hereby acknowledges that participation in the challenge course involves an inherent risk of physical injury and assumes all such risks. The undersigned agrees to waive liability, release and forever discharge Florida Atlantic University Board of Trustees and the State of Florida, its members individually, its officers, agents, employees and volunteers (the "FAU Parties") from any and all demands, rights, and causes of action of whatever kind or nature, arising out of all known and unknown, foreseen and unforeseen bodily and personal injuries, damage to property, and the consequences thereof, including death, resulting from my participation in or in any way connected with such outdoor programs and recreational activities, **INCLUDING WITHOUT LIMITATION THOSE CAUSED BY THE NEGLIGENCE OF THE FAU PARTIES OR OTHERWISE.** I further covenant and agree that I will not sue the FAU Parties for any claim for damages arising or growing out of my voluntary participation in the challenge course and agree to defend, indemnify and hold harmless the FAU Parties from any judgment, settlement, loss, liability, damage, or costs, including court costs and attorney fees, which the FAU Parties may incur as a proximate result of any act or omission on my part during my participation in the challenge course.

Print Name: _____

Group/Organization: _____

This Informed Consent and Release of Liability shall remain in effect for as long as I am a participant in the challenge course. Further, I understand that, if I am an employee or student at FAU, this Informed Consent and Release of Liability shall be effective during the entire period of my enrollment or employment.

I do hereby consent and agree to allow FAU Campus Recreation the use of my image or likeness in photographs, videos, or audio for educational purposes or promotional purposes, including posting on the Internet or other social media. I waive all claims for compensation.

I certify that I am 18 years of age and that I have carefully read and understand this Informed Consent and Release of Liability. This document shall bind myself, any minors on whose behalf I am signing, and both of our respective estates, heirs, administrators, executors, and assigns. This release shall be construed in accordance with the laws of the State of Florida.

Participant Name:		Age:
Address:		Phone #:
Signature:		Date:
Emergency Contact:	Relationship:	Phone #:
Signature of Parent/Guardian (if under 18):		Date:
Print Parent/Guardian Name:		Phone #:
Facilitator Initials:		Date:

Grey area to be used by office personnel only

FAU Challenge Course Participant Expectations

I agree to do the following to support a safe, environmentally sound, and effective experience for myself and others:

- I agree to respect the rights and feelings of other participants and staff and to act in a supportive and caring manner.
- I will not participate in activities or use equipment without proper supervision.
- I understand that I should do nothing that may harm the environment or destroy its natural beauty, so that anyone who follows me may enjoy what nature provides.
- I will not use tobacco, alcohol, or illegal drugs prior to or during the program.

Participant Signature: _____