



## Challenge Course and Program Participation Waiver

\_\_\_\_\_ **print participant name**

\_\_\_\_\_ **print name of group**

**Instructions:** Please read this form carefully. Each participant and/or their parent must sign this agreement before the program begins. Without all appropriate signatures, the individual may not be permitted to participate in the program.

I understand that my/my child's participation in programs by the Outdoor Education Program at The Nuhop Center for Experiential Learning (NCEL) is based on the "Challenge by Choice" philosophy. I recognize that the program is designed to use experiential, engaging teaching techniques, but that my participation is purely voluntary. At all times I will choose my level of participation in any activity.

\_\_\_\_\_ **Initial**

I understand the employees of NCEL have received extensive training and will work to protect the emotional and physical safety of myself and/or my child. I understand that hiking, climbing, high ropes courses, ground initiatives and other activities in the Outdoor Education Program for which I and/or my child have enrolled, entail certain risks. I elect to participate in spite of these risks.

\_\_\_\_\_ **Initial**

Therefore, for myself/my child, I knowingly and voluntarily assume all risks involved in my participation, and do hereby release NCEL and its members, trustees, officers, employees, independent contractors and agents from any and all liability, damages, costs and expenses arising out of or relating to bodily or psychological injury, loss of life or personal property that may occur as a result of participating in this program.

\_\_\_\_\_ **Initial**

I have read and understand and accept the terms and conditions stated herein and acknowledge that this agreement shall be effective and binding upon the parties during the entire period of participation in the said program.

I grant NCEL and persons acting through them the right to use, reproduce, assign, and /or distribute photographs, films, videotapes, and sound recordings of myself or my child for use in materials they may create.

\_\_\_\_\_ **Signature of participant (REQUIRED)**

\_\_\_\_\_ **Signature of Parent/Guardian (REQUIRED)**

**Age:** \_\_\_\_\_

**Date:** \_\_\_\_\_