Release and Informed Consent Form

UNIVERSITY OF MARYLAND - CAMPUS RECREATION SERVICES

ACTIVITIES INCLUDING ROCK CLIMBING WALL AND/OR CHALLENGE COURSE

In consideration of the University of Maryland permitting me to participate in rock climbing wall and/or Challenge Course, and related activities provided by Campus Recreation Services (CRS), I, on behalf of myself, my heirs, personal representative(s) and assigns hereby represent and agree as follows:

1. I understand that the CRS Rock Climbing Wall and Challenge Course consist of a number of activity elements that range from two (2) feet to over fifty (50) feet off the ground, including a fifty (50) foot high ropes alpine tower, a fifty-five (55) foot climbing wall, a forty (40) foot traversing high course and a giant swing. I further understand that my participation in Rock Climbing Wall, Challenge Course and/or related activities is completely voluntary.

2. Upon signing this form, I acknowledge and agree that I must abide by all rules, regulations, expectations, and standards of conduct applicable to participation in Rock Climbing Wall, Challenge Course and related activities including, but not limited to, those shown on the following page. I understand that the University reserves the right to limit or terminate my participation in any activity if, in the sole discretion of CRS Staff, my conduct or actions do not conform to said rules, regulations, expectations or standards of conduct or are otherwise dangerous, disruptive or destructive.

3. I fully recognize and understand that participation in Rock Climbing Wall, Challenge Course and related activities is physically demanding and involves substantial health, safety and other risks and hazards, both minor and serious, including but not limited to: cuts, scrapes, bruises, broken bones, muscle strains, pulls or tears, other bodily injuries, heat prostration, blindness, deafness, heart attacks, temporary or permanent disabilities, paralysis, brain damage, and even death.

4. I fully recognize and understand that Rock Climbing Wall and Challenge Course activities require a minimum level of fitness and experience for safe participation. I also understand that CRS advises that Rock Climbing Wall and Challenge Course participants have a physical examination to determine their fitness for participation. I further understand that the University of Maryland does not provide medical, health or other insurance for Rock Climbing Wall and/or Challenge Course participants.

5. I have had the opportunity to ask any questions that I may have about the Rock Climbing Wall, Challenge Course and/or related activities and the responsibilities and risks involved. All of my questions have been fully answered.

6. Knowing the dangers, hazards and risks associated with Rock Climbing Wall, Challenge Course and related activities, and with sufficient knowledge of my experience, physical condition and limitations, if any, I voluntarily assume all responsibility and risk of loss, damage, illness and/or injury to person or property that I may in any way sustain in connection with my participation in Rock Climbing Wall, Challenge Course and/or related activities.

7. To the fullest extent permitted by law, I hereby release and forever discharge, and agree not to sue and to indemnify and hold harmless, the State of Maryland, the University of Maryland, Campus Recreation Services, and their officers, agents, employees and volunteers from and against any and all liabilities, claims, demands, and causes of action of any kind on account of any loss, damage, illness or injury to person or property in any way arising out of or relating to my participation in Rock Climbing Wall, Challenge Course and/or related activities, and/or use of CRS equipment or facilities, whether due to negligence, default or other action or inaction of any person or entity.

The University reserves the right to limit or terminate participation in any activity if, in the sole discretion of CRS Staff, a participant’s conduct or actions do not conform to CRS rules, regulations, expectations or standards of conduct or are otherwise dangerous, disruptive or destructive.

I CERTIFY THAT I AM 18 YEARS OF AGE OR OLDER AND THAT I HAVE READ AND FULLY UNDERSTAND THIS RELEASE AND INFORMED CONSENT FORM AND I SIGN IT VOLUNTARILY WITH FULL KNOWLEDGE OF ITS SIGNIFICANCE.

Name:___________________________________________________________  Signature:_______________________________________ Date:______________

UID:__________________________________________________