

SUNY Cortland Camp Huntington Challenge Course

Participant Informed Consent/Release Form

SAFETY is a top priority for this program, your facilitators, and the Camp Huntington staff. There are, however, inherent risks of which you need to be aware to make an informed decision about the appropriateness of your participation in this program. Completion of this informed consent/release form serves as notice of the risks of participation and your responsibilities toward your safety and the safety of other program participants.

READ CAREFULLY BEFORE SIGNING

I, the participant, agree that my participation in this challenge course program at Camp Huntington is entirely voluntary.

I, the participant, agree to abide by the safety rules and regulations set by the program facilitators and the Camp Huntington staff.

I, the participant, understand and appreciate that there are certain inherent risks involved in the challenge course program which are beyond the control of the program facilitators or the Camp Huntington staff. I agree to personally be aware of such risks and to acknowledge my personal responsibility to be alert, use good judgment, and participate only in activities that are well within my mental and physical capabilities. These activities include climbing, jumping and other rigorous activities on natural and artificial structures that are on the ground or at low, medium or high distances from the ground. Potential injuries include but are not limited to fractures, sprains, skin abrasions, rope or cable burns, sunburn, insect bites.

I, the participant, hereby certify that I am physically and emotionally fit and able to participate in this program and that I will not engage in any activity unless I have considered it carefully and accept responsibility for the inherent risks.

I, the participant, understand that the facilitators and the Camp Huntington staff cannot be held liable for any injuries sustained which were **not** directly caused by their failure to take due care.

I, the participant, understand that neither Camp Huntington nor the facilitators provide any accident or medical insurance coverage for me and that I am financially responsible for all medical expenses I may incur which exceed the limits of my own personal accident or medical insurance.

I, the participant, acknowledge that I have had the opportunity to ask questions regarding any possible risks or hazards.

I, _____, do hereby release the State of New York, the State University of New York, SUNY Cortland, the SUNY Cortland Outdoor Education Center, the Camp Huntington Staff, and the program facilitator(s) from any claims, damages, liability, and injuries arising out of involvement in this challenge course program and use of the Camp Huntington Facilities. I have read and understand this informed consent/release form.

Participants Signature

Participants Full Name (printed legibly)

Date _____

Witnesses Signature

Witnesses Full Name (printed legibly)

Date _____

Participants under 18:

Parent or Guardians Signature

Parent or Guardians Full Name (printed legibly)

Date _____