Green Adventure Project Participant Assumption of Risk & Waiver Agreement

Green Adventure Project, 920 Camp Road, Charlottesville, VA 22902, P-434.293.4270 F-434.293.2235 www.greenadventureproject.org

Welcome to our Education program! The Education program is a powerful experience designed to foster self-discovery, confidence, teamwork, communication, and hands on learning. We are confident all will find it a great learning experience, both fun and challenging.

When engaged in the Education program, safety is our main concern. We will regularly discuss basic rules of safety and provide the special organization, supervision, instruction, and equipment needed to participate safely in program activities. It is impossible to eliminate all risk, however, participant commitment to follow instructions and use sound personal judgment will contribute greatly to everyone's well being. In order to participate in our Education program this waiver must be signed by the participant and/or parent/guardian. By signing this waiver, the participant and/or guardian accepts that there are inherent risks and hazards in Outdoor Education programming and agrees not to hold Green Adventure Project liable for accidents and/or injury.

When participating in an outdoor educational experience it is important to wear clothing and shoes that you don't mind getting dirty or wet. The program will continue during inclement weather unless it is decided that the experience is no longer safe, so make sure you are prepared. We recommend dressing in layers to stay comfortable. Wool and synthetic materials will help keep moisture away from your skin. Be prepared to be outside for the length of the program.

Please read and sign the following agreement:

I, as the participant and/or parent/guardian of the participant, understand I will be participating in activities that involve experiences outside a typical classroom. I give permission for the named participant to participate in all aspects of the Education Program, including Charlottesville's Challenge Course on the grounds of Triple C Camp, to go on trips outside of camp facility, and to be transported in vehicles operated by the camp. I fully understand that my physical activity involves risk of injury. I understand that the risks may include loss or damage to personal property.

I understand that I will not be forced into doing an activity and that despite all reasonable precaution taken; a guarantee of absolute safety is impossible. I agree to exercise good personal judgment, to ask for help if I am concerned about my safety and to be reasonable for deciding if a proposed activity is appropriate for me. I agree to inform my instructors of any physical, mental, or medical condition that might affect my ability to participate or affect other members of my group. I realize that failure to tell that information could result in harm to myself or others. I also state that I am not under, and will not be under the influence of any chemical substance including alcohol.

I agree to comply with safety instructions given and to be responsible for my personal safety and well-being. I/we agree to hold Green Adventure Project, its Directors, Officers, Employees, Agents, and/or Associates harmless for any accidents, injury, loss of or damage to property that may occur on this program.

I/we understand that all possible precautions are taken to ensure that all programs and activities sponsored by Green Adventure Project are conducted by mature and qualified personnel in a safe and responsible manner. I voluntarily assume the risks of the activities and agree to report any injuries before leaving the Education program.

In the event of an emergency, I/we understand every attempt will be made to contact the parent/guardian. In the event that the parent/guardian cannot be reached I/we give permission to Green Adventure Project to secure proper medical treatment. I understand that any medical expense will be billed directly to me or to or to my insurance company.

I/we are aware that my photograph or video may be taken while on the Education program and may be used in promotional materials. I am aware this is a waiver and release of liability and sign it **voluntarily**.

_____ _____

Signature of Participant Date Signature of Parent/Guardian Date

_____ _____

Printed Full Name Printed Full Name

PARTICIPANT/FAMILY INFORMATION

Participants Full Name _____ Birth Date_____ Gender _____ Grade_____

Allergies and/or Medical Concerns_____

Medications_____

Primary Family E-Mail Address _____

Parent(s)/Guardians Name(s) & Contact Phone Numbers _____

_____

Home Address _____ City _____

State _____ Zip Code _____ Home Phone _____

Are there any other issues or items that we need to know to help us ensure you have a safe, fun and enjoyable time while participating?

_____

_____