

**Activities Release of Liability & Assumption of Risk Agreement**

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**Assumption of Risk:** Participation in any Scheduled Activities, including, the Challenge Course with Climbing Tower and Zip Line and Swimming pool (scheduled activities) carries certain inherent risks regardless of the care taken to avoid injury. Risks may be affected by variable factors such as the weather, course condition, and conduct of participants. Injury risks range from: 1) minor injuries such as scratches, bruises, bumps, and sprains, to 2) major injuries such as broken or sprained joints, tendons, ligaments, legs, or arms, other limb injury or loss of use, and concussions, to 3) catastrophic injuries such as paralysis and death. The participant or parent/guardian (if under 18 years of age) fully understands the risks. In any event, the participant or parent/guardian accepts, assumes, and undertakes all risks. The participant agrees to use sound judgment in undertaking the scheduled activities and to follow instructions, whether oral or written. The participant agrees that participation in the scheduled activities is voluntary. The participant or parent/guardian has read this paragraph carefully in its entirety and knows, understands, accepts, and voluntarily assumes all risks arising out of or relating to participation in the scheduled activities.

In consideration of my use of any Scheduled Activities, I, \_\_\_\_\_, the **(participant)** undersigned user agrees to release and on behalf of myself, my heirs, representatives, executors, administrators, and assigns, **HEREBY DO RELEASE** The Louisiana Conference Center, The Wesley Center, its officers, agents, volunteers, and employees from any cause of actions, claim, or demand of any nature whatsoever, including but not limited to, a claim of NEGLIGENCE, which I, my heirs, representatives, executors, administrators and assigns may now have, or have in the future against the Wesley Center on account of personal injury, property damage, death or accident of any kind, arising out of or in any way related to my use of the scheduled activities whether that use is supervised or unsupervised, however the injury or damage is caused, including, but not limited to the NEGLIGENCE of the Wesley Center, its officers, agents, volunteers, or employees.

In consideration of my use of The Wesley Centers available scheduled activities, I, the undersigned user, agree to **INDEMNIFY AND HOLD HARMLESS** the Wesley Center, its officers, agents, volunteers, and employees from any and all causes of actions, claims, demands, losses, or costs of any nature whatever arising out of or in any way related to my use of the Scheduled Activities.

I hereby certify that I have full knowledge of the nature and extent of the risks inherent in the use of the Scheduled Activities and that I am voluntarily assuming the risks. I understand that I will be solely responsible for any loss of damage, including death, I sustain while using the property and that by this agreement The Wesley Center is **RELEASED** of any and all liability for such loss, damage, or death.

**I wish to participate in Pool Activities**
**I wish to participate in Challenge Activities**

- \_\_\_\_\_  
Initials      **Challenge Course--** I further certify that I am in good health and I have no physical limitations which would preclude my safe use of the Challenge Course with Climbing tower and Zip line. **I understand that the minimum weight for the zip line is 60 lbs, and maximum limit is 250 lbs.**
- \_\_\_\_\_  
Initials      **Swimming Pool--** I further certify that I am in good health and have no physical limitations which would preclude my safe use of the Swimming pool, or other designated swimming or water activities. I understand that the maximum number of guests are determined by the lifeguard
- \_\_\_\_\_  
Initials      **I further certify that my (participant) date of birth is \_\_\_\_\_ (mm/dd/yyyy), that my present age is \_\_\_\_\_, and that I am therefore of lawful (18 years or older) age or I am the Parent or legal guardian's (for those under 18) who is otherwise legally competent to sign this agreement. I further understand that the terms of this agreement are legally binding and certify that I am signing this agreement, after I have carefully read it, of my own free will.**

 \_\_\_\_\_  
Participant Printed Name

 \_\_\_\_\_  
Participant Signature

 \_\_\_\_\_  
Date

 \_\_\_\_\_  
Address

 \_\_\_\_\_  
Home Phone #

 \_\_\_\_\_  
Cell Phone #

 \_\_\_\_\_  
Group / Advisor Name

**If the participant is under the age of 18, a parent's or legal guardian's signature is required to certify that I am the parent or guardian of \_\_\_\_\_, named above, and do hereby give my consent without reservation to the foregoing on behalf of this individual.**

 \_\_\_\_\_  
Parent or Legal Guardian Signature

 \_\_\_\_\_  
Relationship to Minor

 \_\_\_\_\_  
Date

In the event of an emergency, please contact the following person(s) in the order presented:

**Emergency Contact**
**Contact Relationship**
**Contact Telephone**


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