

Baylor Challenge Course

Liability Release Forms



Please read the following instructions carefully and communicate information with the individuals completing the release forms.

FORM INSTRUCTIONS:

- Attached are the release forms for use in connection with the Eastland Lakes Ropes Challenge Course Events. You will need to photocopy the appropriate number of forms necessary for your individual groups.
- On the day of your scheduled group, please bring an alphabetical list of all your participants. This list should be given to your facilitators along with the signed forms.
- You may have been given two forms including an adult participation release and a release for minor participation. Please check to make sure you have completed the correct form. The minor participation form is for anyone under the age of 18.
- Anyone who does not have a form or who has not completed the form completely will not be allowed to participate.
- Please do not change, cross out or add anything to the form. If you make any changes or cross out any portion of the form, you or your child will not be allowed to participate.
- If you want to communicate any information to the challenge course staff, please write it on separate sheet of paper.
- Please fill out the form completely, in ink, including the name of your group. Please print and sign your name and don't forget to add the date next to your signature.
Parents: do not forget to note the name of your child along with your signature.
- Group leaders may not sign for a parent. **NO ONE IS ALLOWED TO SIGN ON BEHALF OF A PARENT/LEGAL GUARDIAN, NO EXCEPTIONS.**

If you have any questions, please contact:

Jeremy Yarbrough: (Work) 254-710-7606, (Cell) 254-366-9925

or

Cody Schrank: (Work) 254-710-7615, (Cell) 254-230-6361



FORM E: ADULT PARTICIPANT RELEASE

BY SIGNING THIS DOCUMENT, YOU ARE WAIVING CERTAIN LEGAL RIGHTS. READ CAREFULLY BEFORE SIGNING.*

GENERAL RELEASE AND INDEMNIFICATION AGREEMENT

For and in consideration of Baylor University permitting me, "PARTICIPANT", to participate voluntarily in the Challenge Course Ropes / Team Building Event with _____ (GROUP NAME), hereafter referred to as "EVENT," at Baylor University in Waco, Texas, as scheduled from June 1, 2018, through May 31, 2019, I hereby expressly assume all the risks associated with the EVENT and I release Baylor University, its regents, officers, employees, students, and agents from all claims, demands, suits, causes of action, or judgments which I ever had, now have, or may have in the future or which my heirs, executors, administrators, or assigns may have, or claim to have against Baylor University, its regents, officers, employees, students, or agents, arising out of or in any way connected with the EVENT, for all personal injuries, known or unknown, property damages, or claims for wrongful death, caused by the

ACTS, OMISSIONS, OR NEGLIGENCE

of Baylor University, its regents, officers, employees, students, or agents.

I FURTHER AGREE TO INDEMNIFY AND HOLD HARMLESS BAYLOR UNIVERSITY, ITS REGENTS, OFFICERS, EMPLOYEES, STUDENTS, AND AGENTS FROM ALL CLAIMS, DEMANDS, SUITS, CAUSES OF ACTION, OR JUDGMENTS WHICH I EVER HAD, NOW HAVE, OR MAY HAVE IN THE FUTURE OR WHICH MY HEIRS, EXECUTORS, ADMINISTRATORS, OR ASSIGNS MAY HAVE, OR CLAIM TO HAVE AGAINST BAYLOR UNIVERSITY, ITS REGENTS, OFFICERS, EMPLOYEES, STUDENTS, OR AGENTS, ARISING OUT OF OR IN ANY WAY CONNECTED WITH THE EVENT, FOR ALL PERSONAL INJURIES, KNOWN OR UNKNOWN, PROPERTY DAMAGES, OR CLAIMS FOR WRONGFUL DEATH, CAUSED BY THE ACTS, OMISSIONS, OR NEGLIGENCE OF BAYLOR UNIVERSITY, ITS REGENTS, OFFICERS, EMPLOYEES, STUDENTS, OR AGENTS, AND ON BAYLOR'S BEHALF AND IN BAYLOR'S NAME, DEFEND AT MY OWN EXPENSE ANY SUCH CLAIMS, DEMANDS, SUITS, CAUSES OF ACTION, OR JUDGMENTS DESCRIBED ABOVE.

I have read and executed this document with full knowledge of its legal significance.

By: _____
PARTICIPANT SIGNATURE DATE

Name Printed: _____
(FORM E) REVISED 05.11.11

*If you are a Baylor employee or a dependent of a Baylor employee, this release shall not be construed to deny any valid direct or first party insurance claims which you or PARTICIPANT may have relating to possible death or to any injuries you or PARTICIPANT may sustain while participating in the EVENT.

FORM D: PARENT/GUARDIAN RELEASE FOR MINOR PARTICIPANT

BY SIGNING THIS DOCUMENT, YOU ARE WAVING CERTAIN LEGAL RIGHTS. READ CAREFULLY BEFORE SIGNING.*

GENERAL RELEASE AND INDEMNITY AGREEMENT

I hereby represent that I am the parent or legal guardian of _____, "PARTICIPANT", who is under the age of 18. For and in consideration of Baylor University permitting PARTICIPANT to participate voluntarily in the Challenge Course Ropes / Team Building Event with _____ (GROUP NAME), hereafter referred to as "EVENT," at Baylor University in Waco, Texas as scheduled from June 1, 2018, through May 31, 2019, I hereby expressly assume all the risks associated with the EVENT and I release Baylor University, its regents, officers, employees, students, and agents from all claims, demands, suits, causes of action, or judgments which participant or I ever had, now have, or may have in the future or which our heirs, executors, administrators, or assigns may have, or claim to have against Baylor University, its regents, officers, employees, students, or agents, arising out of or in any way connected with the EVENT, for all personal injuries, known or unknown, property damages, or claims for wrongful death, caused by the

ACTS, OMISSIONS OR NEGLIGENCE

of Baylor University, its regents, officers, employees, students, or agents.

I FURTHER AGREE TO INDEMNIFY AND HOLD HARMLESS BAYLOR UNIVERSITY, ITS REGENTS, OFFICERS, EMPLOYEES, STUDENTS, AND AGENTS FROM ALL CLAIMS, DEMANDS, SUITS, CAUSES OF ACTION, OR JUDGMENTS WHICH PARTICIPANT OR I EVER HAD, NOW HAVE, OR MAY HAVE IN THE FUTURE OR WHICH OUR HEIRS, EXECUTORS, ADMINISTRATORS, OR ASSIGNS MAY HAVE, OR CLAIM TO HAVE AGAINST BAYLOR UNIVERSITY, ITS REGENTS, OFFICERS, EMPLOYEES, STUDENTS, OR AGENTS, ARISING OUT OF OR IN ANY WAY CONNECTED WITH THE EVENT, FOR ALL PERSONAL INJURIES, KNOWN OR UNKNOWN, PROPERTY DAMAGES, OR CLAIMS FOR WRONGFUL DEATH, CAUSED BY THE ACTS, OMISSIONS OR NEGLIGENCE OF BAYLOR UNIVERSITY, ITS REGENTS, OFFICERS, EMPLOYEES, STUDENTS, OR AGENTS, AND ON BAYLOR'S BEHALF AND IN BAYLOR'S NAME DEFEND AT MY OWN EXPENSE ANY SUCH CLAIMS, DEMANDS, SUITS, CAUSES OF ACTION OR JUDGMENTS DESCRIBED ABOVE.

I have read and executed this document with full knowledge of its legal significance.

BY: _____
PARENT/LEGAL GUARDIAN SIGNATURE DATE

Name Printed: _____
(FORM D) REVISED 05.11.11

*If you are a Baylor employee or a dependent of a Baylor employee, this release shall not be construed to deny any valid direct or first party insurance claims which you or PARTICIPANT may have relating to possible death or to any injuries you or PARTICIPANT may sustain while participating in the EVENT.