



Challenge Course Consent Form

Participant Name: _____

Age: _____

Group Name: _____

City: _____

The Hesperus Challenge Course is a professionally constructed course that is regularly inspected and maintained according to industry standards. It is operated by certified facilitators and according to the "challenge by choice" principle whereby all participation is by personal choice of the participant.

I. RELEASE AND INFORMED CONSENT

I, the undersigned "Participant", hereby acknowledge that I have voluntarily applied to participate on the Hesperus Challenge Course.

I am aware that these activities will necessarily involve participation in exercises which by their nature may be considered inherently dangerous and physically demanding and may subject the Participant to stress, anxiety, and other hazards, not all of which can be foreseen. It is fully understood that the Participant may be climbing and walking on cables, logs, ladders, walls, and beams. The Participant will participate in activities, which may be at substantial heights above the ground. Additionally, the participant may be participating in activities that require hiking across undeveloped terrain.

Prior to my participation, I will be advised of the rules and requirements governing my participation. I agree to accept and abide by those rules and requirements.

I agree that if at any time I believe these activities are beyond the scope of my capabilities, I will immediately so notify the supervisory personnel and withdraw from participation.

In consideration of being allowed to participate on the Hesperus Challenge Course, I hereby release and covenant not to sue Hesperus Baptist Camp or any of its board of directors, officers, staff, employees, owners, agents and any individual or company assisting, instructing or conducting the challenge course activities from all liability of any nature for any and all injuries, loss, death, claim or damage I may suffer due to my own negligence. This release is binding on my heirs, personal representatives and assigns.

II. NOTICE REGARDING IMPACT OF MEDICAL OR PHYSICAL CONDITIONS

Please read and check your response to each question.

1. Do you weigh over 235 lbs.? Yes No
2. Do you have a healing fracture or joint injury? Yes No
3. Do you have any abdominal organ enlargement? Yes No
Enlarged spleen may occur as the result of mononucleosis or enlarged liver from a condition such as hepatitis.
4. Do you have insect allergies? Yes No
If YES, you should have an Epi-pen or other self treatment.
5. Are you pregnant? Yes No
6. Have you had an organ transplant? Yes No
7. Do you have asthma? Yes No
You should bring your medication with you to the program.

Be aware that, as in any physical activity, your heart rate can increase due to participation. If you are aware of a personal heart history, we request you self-monitor or withdraw from activity that may overstress you.

III. SELF-GUIDE FOR DETERMINING PARTICIPATION ON CHALLENGE COURSE ACTIVITIES

The following information is to be used to determine participation in challenge course activities. If you answered “Yes” to questions on the “Information to Assess Participation Level” questionnaire above, the following are appropriate actions.

Weight Over 235 lbs: The zip line is physically capable of 6000 lb. loads, however loads exceeding 235 lbs. have a safety risk as it relates to ground clearance at two points along the zip. Riders exceeding this limit could make contact with the ground and therefore are **NOT allowed to participate**.

Healing Fracture or Joint Injury: It is suggested that you check with your doctor if in doubt about the activity.

Organ Enlargement: You may not wear a harness, but may participate in all other activities.

Insect Allergies: Have the kit to administer appropriate medication with you on the course. You must have received instruction on how to administer the injection properly.

Pregnancy: You will be excluded from all activity where you might fall, or get a shock load to the body. You may not participate where a harness is required and must not be involved in heavy lifting.

Organ Transplant: You may not participate where a harness is required.

Asthma: Be aware of your own well being. Transportation is available to take you to an inside facility. If a severe attack occurs, a call to 911 can be made for transportation to a medical facility.

As in any physical activity, be alert to discomfort, light headedness or other indications of a possible cardiac incident. Make an intelligent decision early for yourself about your level of participation.

Limiting your participation in the physical group activities does not exclude you from being an active participant in the process. There are several other roles you can fulfill if you are unable to fully participate in the physical activities. Your facilitator can help you discover those opportunities.

By my signature below, I certify that

1. I do not weigh over 235 lbs.;
2. I have carefully read and fully understand the contents of this Informed Consent;
3. All information I have provided is accurate;
4. I have not taken any medication and have no known physical or medical condition that would impair my capability for full participation in the Hesperus Challenge Course;
5. I assume responsibility for any potential adverse impact any condition or medication may have upon my full participation in the Hesperus Challenge Course; and
6. I am aware that this is both a release of liability and an acknowledgment of notice, and I have signed it of my own free will.

Participant Name (PRINTED) _____

Participant Signature _____

Date _____

Witness/Parent Signature _____

Date _____

Parent signature required for participants under the age of 18 years old.