

Lifeline Youth and Family Services Inc.
7136 Gettysburg Pike, Fort Wayne, Indiana 46804 (260-745-3322)
High Ropes, Low Ropes, Climbing Wall and Activity Release and Information Form

PLEASE PRINT

Group/School Name _____ Event Date _____

Participants Name _____ Age : _____

Address : _____

City : _____ State : _____ Zip : _____

Home Phone Number : _____

PLEASE PROVIDE THE FOLLOWING INFORMATION IN CASE OF EMERGENCY:

Person to notify : _____

Relationship : _____ Phone : _____

Insurance Provider _____

Policy Number : _____

Doctor's Name _____

Phone Number : _____

Allergies : _____

Please list any disability or health problems that may affect your ability to participate in the **Lifeline Youth and Family Services Ropes Courses and Activities** _____

PLEASE READ CAREFULLY AND SIGN :

The Lifeline Youth and Family Services Inc. (LYFS) Ropes Courses and Climbing Wall at Pierceton Woods Academy involves physically and emotionally demanding activities in both an indoor and outdoor setting. It includes climbing, jumping, and other rigorous activities on natural and manmade structures that are on the ground or at low, medium, and high distances from the ground. You will be working with trained facilitators and with others in your group. It is possible you may be injured while participating in the program. Pregnant women, those who feel they may be pregnant or those with any health issues should consult a physician prior to participation in the Ropes or Climbing activities. Your facilitator will explain to you the safety factors involved in participating in the Ropes or Climbing activities. I/We are fully aware the LYFS Ropes Courses and Climbing Wall include rigorous physical activity. I/We are aware of the risks of physical injury or harm from participating in the Ropes Courses or Climbing Wall. I/We voluntarily elect to participate in the program. I/We assume the risk of injury or harm that could result from participating in the program. On my behalf, and on behalf of my personal representative and heirs, I hereby: release LYFS Inc. , its officers, employees, consultants, agents, and directors from all liability for any injury or harm to me from participating in the LYFS Inc. Ropes Courses and Climbing Wall, whether the injury or harm is caused by negligence or otherwise. I/We give permission for LYFS Inc. to reproduce any photographs, videos, and slides, taken for publicity purposes. I/We have read and understand the release of liability. I/We voluntarily sign it. I/We give permission for LYFS Inc. to administer basic first aid and to seek appropriate medical assistance for the participant above.

Participant's Name _____

Signature : _____ Date : _____

Parent/Guardian's Signature (if the participant is under 18 years old):

_____ Date : _____