

**GIRL SCOUTS OF SAN JACINTO COUNCIL
ADVENTURE PARK HEALTH STATEMENT**

The Adventure Park activities provided by Girl Scouts of San Jacinto are, by their nature, physically demanding. Many of the activities will challenge you and may cause surges in blood pressure and pulse rates. Therefore, all Adventure Park participants must be free of medical or physical conditions, including heart conditions, which might create undue risks to themselves or other participants, or otherwise must participate based on consultation with their physician.

Date _____

Participant Name _____

Age: _____

Address _____

City, State Zip: _____

Mobile Phone: _____

Name of Physician: _____

In An Emergency Notify: _____

Relationship: _____

Phone Number: _____

_____ **Initials:** Participant weighs between 70 and 300 pounds to participate at Adventure Park.

_____ **Initials:** Participant weighs between 70 and 250 pounds to participate on the zip line.

_____ **Initials:** Participant can reach a height of 70 inches while standing flat-footed.

_____ **Initials:** Participant is not currently pregnant. Participation is prohibited while pregnant.

_____ **Initials:** Participant is not under the influence of alcohol or any over-the-counter, prescribed or illegal substances that may cause them to be a danger to themselves or to others while participating in Adventure Park activities.

Medical Conditions of Concern: The following medical conditions may increase the risk of injury or illness. People with these conditions may be advised not to take part in the activities and should consult a physician before participating. Signatory agrees it has considered all of the following and any other medical conditions of concern in signing this statement.

- Heart conditions or chest pains
- Fainting or dizziness
- Untreated high or low blood pressure
- Blood clotting or thinning disorders or treatments
- Back or neck injuries or chronic conditions or other musculoskeletal disorders
- Recent injuries, reoccurring injuries, recent surgeries
- Seizure disorders, epilepsy
- Diabetes

I affirm that I, or the minor participant, do not currently experience any medical conditions that could impact my participation or have consulted with our physician, and I believe that my/her health is satisfactory to participate in Adventure Park activities. I understand that is it solely my responsibility to determine whether there is any medical reason that the participant should not participate in the program.

NAME OF PARTICIPANT (PLEASE PRINT): _____

Signature of Participant (18 years and older) _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

_____ I, or the minor participant, require accommodations for successful participation, and/or I, or the minor participant, would like to speak with someone prior to participation.

Girl Scouts of San Jacinto Council
Agreement to Participate and Assumption of Risk and Release of Liability
Please Read before Signing

WHEREAS THE UNDERSIGNED (“the PARTICIPANT”) wishes to be accepted for participation in the Adventure Park challenge course to be organized and conducted by Girl Scouts of San Jacinto (“GSSJC”); and in consideration of (GSSJC) action in allowing the applicant to participate in such program:

The undersigned acknowledge(s) that during the said challenge course experience that the applicant has requested to participate in, certain risks and dangers may occur. These include but are not limited to the hazards of being at various heights (ground to 40’). The undersigned further recognizes that these risks may also include loss or damage to personal property, physical or psychological damage and/or injury not excluding fatality due to accidents which may occur, including accidents resulting from this challenge course experience or other type of outdoor activities. I further understand that by participating in the activities I am requesting to participate in, I may be exposed to the effects of the elements of nature, including temperature extremes and inclement weather.

Inherent Risks of this activity include, but are not limited to:

- Slips and harmful contact with other persons, structures, and objects.
- Carelessness and misjudgments— by patrons, other patrons, and staff.
- Failure of holds, structures, and equipment.
- Weather conditions, uneven terrain, and falling objects.
- Increased heart rate and other symptoms of anxiety, stress, and physical exertion.
- Flora and fauna including stings or bites.

Patrons must:

- Weigh between 70 and 300 pounds to participate on the Adventure Park and Dyno Auto Belays.
- Weigh between 70 and 250 pounds to participate on the Zip Line.
- Be able to fit securely and always remain in the harness.
- Course participants must be able to reach all belay cables at the ground school area and on the course.
- Tie back long hair.
- Wear sturdy, closed-toe sport sandals or shoes.
- Secure or leave behind all loose items, such as loose clothing, jewelry, cameras, phones, or water bottles.
- Read, understand, and follow all instructions, posted or otherwise.

Patrons must obey all written and oral instructions. The staff may, in their sole discretion, deny any patron’s participation if they believe it is unsafe based on the manufacturer’s requirements or the patron’s behaviors.

Release of Liability

In consideration of, and as part payment for the right to participate in such program, I and the participant have and do hereby **ASSUME ALL THE RISKS** (including, but not limited to, the above risks) of participating in the Adventure Park and hereby fully and completely **RELEASE, ACQUIT, AND FOREVER DISCHARGE** GSSJC, its Board of Directors, officers, employees, agents, representatives, and/or associates, and their heirs, executors and administrators, successors and assigns, and any and all other persons and entities for whom they could be legally responsible (collectively, the “Releasees”) from any and all past, present, or future liability, actions, causes of action, debts, claims and demands of every kind and nature whatsoever, whether for bodily injury, property damage or loss or otherwise, whether based on contract, promissory estoppel, statute, intentional or unintentional tort, personal injury, fraud, or any other theory of recovery, and whether for compensatory damages, specific performance, exemplary damages, attorneys’ fees, court costs, expenses, interest, or compensation of any nature whatsoever, known or unknown, fixed or contingent, liquidated or unliquidated, accrued or unaccrued, now existing or that might arise hereafter, which I or the participant now have or which may arise from or in connection with my program or participation in any other activities arranged for me by Releasees for all members of my family, including any minors accompanying me. In short, I cannot sue GSSJC, and, if I do, I cannot collect any money. In addition, I will be liable for attorney and court fees associated with any litigation against GSSJC. I also state that I or the minor participant, am/is not under, and will not be under the influence of any chemical substance, whether over-the-counter, prescription, illegal, or otherwise, including alcohol. I fully understand that the participant’s physical activity involves risk of injury. I also understand that the participant’s participation in this GSSJC program is entirely VOLUNTARY. The participant and I take full responsibility for our voluntary decision for the participant to participate or not to participate and agree to follow all safety instructions. This Agreement shall be construed in accordance with the laws of the State of Texas. Venue for any disputes relating to this Release shall lie exclusively in Harris County, Texas.

By signing below, **I hereby certify that I have read and fully understand all of the terms of this Agreement and that I am voluntarily giving up substantial legal rights, including the right to sue the Releasees as described above.** I am voluntarily, knowingly, and unconditionally signing this Agreement and hereby agree to all of the terms and conditions of this Agreement. I represent and warrant that I have the full legal authority to sign, and am signing, this Agreement on behalf of myself and/or the participant.

NAME OF PARTICIPANT (PLEASE PRINT): _____

Signature of Participant (18 years and older) _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____