

IOWA VALLEY ADVENTURES CHALLENGE COURSE

Your Name: _____ Age: _____
(please print)

Address: _____
(street) (city) (state) (zip)

This information is to be confidential.

1. Are you currently taking any prescription or non-prescription medication? Yes No
If yes, what are they and what are they for? _____
2. Do you have any heart conditions? Yes No
If yes, please explain: _____
3. Do you have high blood pressure? Yes No
4. Do you have any allergies (food, bees, insects, or medicines)? Yes No
If yes, please explain: _____
5. Any other medical conditions not listed above (i.e. pregnancy, diabetes, broken bones)? If yes, please explain: _____ Yes No
6. One element, known as the Swing by Choice, has a weight limit of 300 lbs. for safety reasons. Do you foresee any problems participating in this event or others at Iowa Valley Adventures due to lack of exercise? Yes No
If yes, please explain: _____
7. Do you feel any pressure or coercion from employer or others to participate? Yes No
8. Do you have a disability? Yes No
If yes, please indicate the functional implications and any concerns about Participation related to the disability: _____

9. Describe your current level of physical activity: _____

In case of emergency, contact: _____ Phone: _____

Medical insurance (company and policy number): _____

Please read and sign

I have honestly disclosed to the staff any medical, psychological, or personal information relating to my health. I will remember that a Challenge by Choice atmosphere exists at all times and I should not feel pressured to participate.

Signature of participant

Date

Signature of parent/guardian if participant is under 18 years of age

ACKNOWLEDGEMENT OF RISK--RELEASE OF LIABILITY—
READ BEFORE SIGNING

In consideration of being allowed to participate in any way in the Iowa Valley Continuing Education Adventures Challenge Course, its related events and activities, I, _____
(Print name here)

The undersigned, acknowledge, appreciate, and agree that:

1. I am aware and understand that all of the program activities are strictly voluntary and it is my own choice to participate in each activity to whatever degree I deem appropriate after I've considered my own physical health, physical abilities and medical condition.
2. I willingly agree to comply with the stated and customary terms and conditions for the participation. If, however, I observe any unusual significant hazard during my presence or participation, I will immediately remove myself from participation and bring such to the attention of the IVCE Adventures Challenge Course Facilitator immediately.
3. I have read the What You Should Know About The Iowa Valley Adventures Challenge Course.
4. I hereby release, indemnify, and hold harmless the Iowa Valley Community College District, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and leaser of premises used for the activity ("Releases") with respect to any and all injury, disability, death, or loss or damage to person or property.
5. I further state that in choosing to participate I am not under the influence of any chemical substance, including alcohol.
6. Consent:
 - a. My signature below indicates I understand during my IVCE Adventures Challenge course I may be exposed to above normal risks, which may include heights, and outdoor settings. Furthermore, I understand that although IVCE Adventures Challenge has taken precautions to provide safe equipment and qualified staff, it is impossible for IVCE Adventures Challenge to guarantee absolute safety.
 - b. I knowingly and freely assume such risk and assume the responsibility for safety on the course.
 - c. I agree to comply with the instructions of the IVCE Adventures Challenge Facilitators during the course.
 - d. I have had sufficient opportunity to read the entire document. I have read and understand it and agree to be bound by its terms.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Signature of Participant: _____ Print Name: _____

Address: _____

Phone Number: _____ Date: _____

FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE (participants under the age of 18)

This is to certify that I, as a parent/guardian with legal responsibility for _____
(print minor's name)

do consent and agree to his/her release as provided above of all the same liabilities incident to my minor child's involvement or participation in the Iowa Valley Continuing Education Adventure Challenge Course, even if arising from the negligence of the releases, to the fullest extent of the law. **I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

Parent/Guardian Signature

Print Parent/Guardian Name

Date

What you should know about the Iowa Valley Adventures Challenge Course Customary Terms and Conditions for Participation Agreement

We are very excited about your upcoming visit to the Iowa Valley Adventures Challenge Course. The following information should help you to have a safe, meaningful, and fun experience.

We are a team building, leadership development program. Our philosophy is “**Challenge by Choice**” which means YOU set personal goals and challenges. The team will encourage you to reach your goals, but **NO ONE** will coerce you into doing anything you are not comfortable with. All participants are expected to participate in the group learning to whatever extent they are comfortable.

Participants who belay are required to be at least age 13.

Participants younger than 18 must have a Medical/Release of Liability forms signed by a parent or legal guardian. Participants 18 or older will sign their own forms.

Participants are allowed on high elements only after a preliminary session.

What to wear:

Comfortable clothes that you do not mind getting stained or dirty. (Not baggy clothes). Long pants are suggested to protect your legs from scrapes or splinters, however shorts are acceptable depending on the weather. Participants may be asked by the facilitator to remove objects from body or clothing that could lead to injury.
Tennis shoes or hiking boots with good traction

What NOT to wear:

Jewelry-Including rings, watches, earrings, necklaces, etc...(if rings can't be removed, they must be taped)
Sandals or dress shoes.
Baggy Clothes.

What to bring:

Sunglasses and hat or sun visor to keep sun out of eyes.
Ponytail holder for long hair (long hair should be pulled up in a bun or clipped up) or clips to keep hair out of face.
Weather gear-windbreaker, raincoat, winter gloves, etc... depending on the weather.
Camera (if you want to capture the memories!!).
Gatorade, PowerAde, bottled water, etc...
Sun screen and insect repellent

If you have a pre-existing condition such as asthma, bee or wasp allergies, diabetes, etc... bring the appropriate medications or snack foods you need.

What NOT to bring:

Personal climbing equipment - we will provide everything you will need.
Alcohol, tobacco products, illegal substances, etc... We have a no smoking policy.
Glass containers.
Valuables. (There is no place to store anything.)

What to Expect:

Our outdoor facility provides a minimal amount of shade.
We have a port-a-john on site and running water is a short car ride away.
Please dress appropriately and bring additional clothing items to add/remove or change into as the day progresses.
Events will not be held on the course in certain weather conditions: Lightening occurring in the area, temperatures below 40 degrees and high winds or gusts of more than 35 mph. Activities may continue or be discontinued in inclement weather at the facilitator's discretion. The facilitator and the Challenge Course manager may deem other environmental conditions unsafe and cancel, delay or halt an activity at their discretion
Problem solving, team building, group games, development of leadership skills, climbing, and **FUN**.