Youth/Family Rock Climbing Lessons
Fall 2015 Registration Form
Physical Education and Recreation

Please fill out one form per child.

Child’s Full Name ____________________________ Birth Date ___________ Gender ______________

Parent/Guardian Name ____________________________ Phone _________________________

Mailing Address _______________________________________________________________________________

Primary E-mail ________________________________________________________________________________

Emergency Contact Name ____________________________ Phone _____________________________

Affiliation: Select proper affiliation below. You must provide proof of affiliation when registering.

Community _______ UO Alumni _______ UO Student _______ UO Faculty/Staff _______ Rec Member _______

Please place a check mark below next to each session in which you would like to register.

Family Rock Climbing Lessons (ages 5+)
Prices: Community $57/UO Alumni $51/UO Student, Faculty/Staff, or Rec Member $45
Price includes one adult and one child. Additional family members may be added for $15.

_______ Session 1: Saturdays, October 3 - 24 from 10:15-11am

_______ Session 2: Saturdays, October 31 – November 21 from 10:15-11am

Additional Climber(s) Name & Age ($15/family member for up to 3 additional family members):

___________________________________________________________________________________________

Youth Rock Climbing Lessons (ages 11+)
Prices: Community $42/UO Alumni $36/UO Student, Faculty/Staff, or Rec Member $30

_______ Session 1: Saturdays, October 3 - 24 from 11-11:45am

_______ Session 2: Saturdays, October 31 – November 21 from 11-11:45am

Total (for office use only): ______________
NOTICE: THIS IS A LEGALLY BINDING CONTRACT. In consideration of my being permitted by Physical Education and Recreation to participate at the Urock climbing wall:

I HEREBY ACKNOWLEDGE THE INHERENT EXTREME RISKS IN ROCK CLIMBING including climbing on natural and artificial surfaces. I understand that this course may be physically and emotionally demanding, and that I may be exposed to real risks of injury, or even death from such hazards or events as falls from or contact with the rock surface and/or equipment, inattention of or mistakes made by belayers or actions of other climbers, misuse or failure of equipment, loose or damaged holds. I acknowledge that the above list is not inclusive of all possible risks associated with participation in indoor rock climbing, and I agree that the above list in no way limits the extent or reach of this waiver/release.

I AGREE TO ASSUME ALL RISKS OF PERSONAL INJURY including paralysis and death, that may occur while I am engaged in activities, whether or not under the direct supervision of rock wall personnel. I agree that I will not engage in any activity unless I have considered it carefully, believe it to be safe, and accept responsibility for all related risks. I acknowledge that my safety is my personal responsibility, and that my safety depends upon my alertness and my use of good judgment.

I UNDERSTAND THAT I CAN REDUCE RISKS by paying careful attention to the environment, to my physical and emotional state, the condition of all safety related clothing and equipment, and by participating only in those activities that are well within my mental and physical capabilities.

I agree to pay attention to the physical condition of any rock climbing equipment that I may use, and to advise the instructional staff if I do any damage or notice damage to any item of equipment. I acknowledge that I have received participation protocols (in writing and/or verbally) that I understand them and agree to abide by them. I understand that a higher level of skill, judgment and decision-making is necessary to climb safely in an indoor setting.

I ACKNOWLEDGE THAT I AM IN GOOD HEALTH and have no physical limitations which effect my ability to safely participate in this outing. I understand that I should have health insurance adequate to provide for and pay any medical costs that may directly or indirectly result from participating in this outing, and, to the extent permitted by law, I agree to indemnify and hold harmless the State of Oregon with respect to all costs.

TO THE EXTENT PERMITTED BY LAW, BY MY SIGNATURE BELOW I WARRANT THAT I:
1) have read the above statements and understand their provisions;
2) understand the risks associated with participation in this course;
3) assume full responsibility for the consequences of choosing to participate in this activity;
4) hereby knowingly and intentionally release and hold harmless the State of Oregon, State Board of Higher Education and the University of Oregon, its agents, officers and employees from any and all claims, demands, injuries, actions (including third party claims), and damage of any kind and nature whatsoever which arise out of or in connection with participating in this course, regardless of whether such claims are based upon negligence or other grounds.

NAME OF PARTICIPANT (please print neatly): ........................................................................................................

SIGNED: ........................................................................ DATE: ..........................

NOTE: IF THE PARTICIPANT IS UNDER 18 YEARS OF AGE, A PARENT OR GUARDIAN MUST INITIAL THE ABOVE CLAUSES AND SIGN BELOW.

NAME OF PARENT OR GUARDIAN (please print neatly): ........................................................................................................

PARENT OR GUARDIAN SIGNATURE: ........................................... DATE: ..........................