

To provide a learning experience in adventure based programming that leads to “holistic change” in intrapersonal and interpersonal dynamics.  
NNU Challenge Course

**Dear Participant,**

Congratulations! You have registered for an Adventure Program at Northwest Nazarene University Challenge Course. We hope you have a great day on the course, and use this experience for healthy personal and group development and have fun doing it!

Please read through all the enclosed information, SIGN AND RETURN one copy of the Program Contract. This signed contract, along with the release and medical forms are due back by \_\_\_\_\_, or the reservations maybe cancelled.

Here is some information that can help prepare you and your group for the day:

What to wear:

- Loose, comfortable clothing that you can move around in well
- Tennis or wading shoes, lightweight hiking boots (no open toed shoes, flip flops, or sandals)
- Layers of clothing, so you can adjust as needed according to the weather
- Baseball cap or sun visor and sun glasses for sunny weather and a warm hat or cap for cooler weather

What to bring:

- Bottled water or sports drink, etc. for yourself. (Please, no alcoholic beverages!) N.N.U. can provide cold or hot drinks for an additional fee.
- Food, i.e., fruit, granola bars, etc. for snacks or bring your own sack lunch. NNU can also provide food such as snacks, box lunches or buffet style meals at an extra cost. (Please refer to Sodexo Food Services)
- Warm jacket or coat, wool cap/hat and gloves for cold weather and hooded rain jacket /poncho for rainy weather.
- For hot summer weather please bring sunscreen, and insect repellent
- **Forms:** Attached are a release form and a medical form. Be sure you read them. First, be aware that no one **under 12 years of age** is allowed on any of the high elements, (tower and swing). Secondly, **if you are under 18**, you AND your parent or legal guardian must sign your release form. If you are **over the age of 35**, there are some extra pages of medical forms to fill out, and most of these pages have a place for your signature. You are encouraged to consult your medical professionals if you have any questions about you participation. These forms apply to whatever you do while you are with us, i.e., ropes course, rappelling or climbing, initiatives, etc.

You may wish to listen to the weather forecast so you will have a better idea how to prepare. In the event of foul weather, your facilitator will call the contact person for your group to make a decision about whether or not to reschedule the day.

Last, but certainly not least, bring your own physical and mental readiness to challenge and support yourself and your group. Thank you for registering for an adventure experience with NNU Challenge Course.

See you on the course,

Rob King, Challenge Course Manager

Attachments

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## **RELEASE / HOLD HARMLESS / INDEMNITY/ ASSUMPTION OF RISK AGREEMENT**

**Release:** The undersigned, in consideration of being permitted to participate in the Northwest Nazarene University Challenge Course Adventure Program, for educational purposes does hereby irrevocably, personally and for his or her heirs, assigns and legal representatives, release and waive any and all past, present or future claims, demands, and causes of action which the undersigned now has or may in the future have against Northwest Nazarene University, its members, directors, administrators, representatives, officers, agents, employees, and assigns, and each of them (hereinafter jointly and severally referred to as “Releasees”), for any and all past, present or future loss of or damage to property, and /or bodily injury, including death, however caused, resulting from, or arising out of or in any way connected with his/her participation in or use of the Northwest Nazarene University Challenge Course Adventure Program.

**Hold Harmless / Indemnity:** The undersigned agrees to defend, indemnify and hold harmless the Releasees and each of them from any loss, liability, damage or cost she/he might incur due to her/his participation in or use of the Northwest Nazarene University Challenge Course Adventure Program. The undersigned further covenants not to cause any action at law or in equity to be brought or permit such to be brought in his or her behalf, either directly or indirectly, on account of loss or damage to property and/or bodily injury, including death, against the Releasees, resulting from, or arising out of, or in any way connected with any claims, demands, and causes of action which now or in the future may be asserted against the Releasees arising out of or by reason of said course described above, including any injury, loss or damage that might occur at any place in connection therewith.

**Assumption of Risk:** The undersigned further states and affirms that he/she is aware of the fact that the aforesaid course, even under the safest conditions possible, may be hazardous; that he/she assumes the risks of any and all loss of or damage to property and/or bodily injury, including death, however caused, resulting from, arising out of or in any way connected with the Northwest Nazarene University Challenge Course Adventure Program; that he/she is of legal age and is competent to sign this Waiver of Claims and Release from Liability; and that he/she has read and understands all of the provisions herein contained. Risks include but are not limited to the following: stumbling while walking, bumping into objects, bumping into other people, tripping and falling, or hitting one’s head, fractures, dislocations, sprains, contusions, cuts, abrasions, sunburn,

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lightning, insect bites, bee sting, psychological stress, jumping related injuries, swinging related injuries, eye injuries, nose injuries, face injuries, hand injuries, finger injuries, finger nail injuries, toe injuries, toe nail injuries, foot and ankle injuries, lower leg injuries, mid leg injuries, upper leg injuries, thigh injuries, abdominal injuries, pelvic injuries, genital injuries, rib injuries, sternum injuries, throat injuries, neck injuries, breast injuries, hair getting caught or pulled, ear injuries.

The undersigned has read and voluntarily signs this release and waiver of liability and indemnity agreement. The undersigned further agrees that no oral representations, statements or inducements apart from the foregoing agreement have been made.

**NOTE:** Your membership in the organization sponsoring your participation in the Northwest Nazarene University Challenge Course Adventure Program does not in any way include or guarantee to you any insurance coverage of any kind.

Dated: \_\_\_\_\_

Signed: \_\_\_\_\_ (Participant Signature)

**NOTE: (Parent or Guardian Signature). If Participant is under 18 years of age, this form must be signed by the Participant and by the parent or guardian)**

Signed: \_\_\_\_\_ (Parent or Guardian Signature)

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## MEDICAL INFORMATION

The information requested below is private data. This data will only be used in the event of an emergency where medical treatment is needed. You may refuse to supply the requested information; however, failure to provide the data will hamper the giving of emergency medical treatment.

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

AGE \_\_\_\_\_ HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_

CONTACT PERSON IN EMERGENCY \_\_\_\_\_

PHONE #'S \_\_\_\_\_

ADDRESS \_\_\_\_\_

RELATIONSHIP TO YOU \_\_\_\_\_

### MEDICAL DISQUALIFICATION NOTIFICATION:

If within the past 2 months you have had or are currently seeking treatment for one or more of the conditions mentioned below, participation in the Northwest Nazarene University Challenge Course Adventure Program may not be allowed:

- ❖ Recent or chronic neck or back surgery or injury
- ❖ Vertigo/Dizziness
- ❖ Recent surgery – permitted if accompanied by physicians clearance note
- ❖ Pregnancy
- ❖ Heart conditions
- ❖ Stroke
- ❖ Aneurism
- ❖ One eye
- ❖ Multiple concussions or severe head injuries
- ❖ High blood pressure

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I, the applicant (and parent or guardian of minor applicant), assume full responsibility for the applicant’s health being such that the activities will in no way aggravate any conditions present. If in doubt, medical advice will be sought and followed. The sponsoring agency will be notified of any changes in the applicant’s health status prior to trip or program departure or date. I realize that unforeseen hazards may exist because of natural occurrences beyond the control of the instructors.

I declare the statements on this form to be correct, true and honest.

Dated: \_\_\_\_\_

Participant Signature: \_\_\_\_\_

**NOTE: (Parent or Guardian Signature). If Participant is under 18 years of age, this form must be signed by the Participant and by the parent or guardian)**

Signed \_\_\_\_\_ (Parent or Guardian Signature)