

Troop 90 Permission Slip

Activity: Climbing Day at Vertical Endeavors
Date: Saturday, December 5, 2009
Adult Leader: Mr. Machacek
Departing from: Brook Park School at 7:00 AM
Return to: Boy's Homes at 2:00 PM
Cost: \$40.00 for Merit Badge; \$18.00 for free climbing
Transportation: Car - Drivers needed (adults can climb too for \$18.00)
Each boy is to bring: Money for snacks, lunch; completed waiver
During this activity: Mrs. Sheehan will receive emergency calls at 708-805-0252

At the discretion of the adult leaders in charge, if there is any serious discipline problem with a scout during this activity, the parent of the scout involved will be called and instructed to pick up his or her son immediately.

Permission slip must be returned by: **WEDNESDAY NOVEMBER 18, 2009**

My son: _____ has my permission to attend
Climbing at Vertical Endeavors on December 5, 2009

I understand the cost will be \$40 for merit badge \$18 for free climbing

He should be restricted from _____

He is susceptible (or allergic to) _____

In case of emergency phone _____

The person here described has permission to participate in all prescribed activities, except as noted. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the adult leader in charge to hospitalize, secure proper anesthesia, or order injection or surgery for my son.

Signature _____ Date _____

I am willing to drive Yes _____ No _____

RELEASE OF ALL CLAIMS, WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNIFICATION AGREEMENT

ADULT

CHILD

INTERNET WAIVER

Print First Name Middle Initial Last Name

Print First Name Middle Initial Last Name

WARNING, THIS AGREEMENT IS LEGALLY BINDING. BY SIGNING IT, YOU GIVE UP YOUR RIGHT TO RECOVER COMPENSATION THROUGH THE COURTS OR OTHERWISE, FOR ANY PERSONAL INJURIES OR DAMAGE TO YOUR PROPERTY, OR FOR YOUR DEATH, ARISING OUT OF YOUR USE OF THE ROCK CLIMBING WALLS OR EQUIPMENT, OR ARISING OUT OF YOUR PARTICIPATION IN CLASSES OR ACTIVITIES, INCLUDING TRANSPORTATION PROVIDED BY VERTICAL ENDEAVORS, SPONSORED BY VERTICAL ENDEAVORS, INC., VERTICAL ENDEAVORS-CHICAGO, INC., VERTICAL ENDEAVORS-DULUTH, INC. OR ANY AFFILIATE OR WHOLLY OWNED SUBSIDIARY OF THE SAME (HEREINAFTER COLLECTIVELY REFERRED TO AS "VERTICAL ENDEAVORS".) YOU WILL BE RELEASING THE LANDLORD OF VERTICAL ENDEAVORS, ANY PERSONS WHO HAVE DESIGNED, MANUFACTURED OR INSTALLED THE FACILITIES, CLIMBING WALLS OR EQUIPMENT OF VERTICAL ENDEAVORS AND ANY PERSONS USING THE CLIMBING WALLS OR EQUIPMENT OF VERTICAL ENDEAVORS. THIS AGREEMENT IS BINDING ON YOU, YOUR HEIRS, NEXT OF KIN, ASSIGNS, AND PERSONAL REPRESENTATIVES. THIS AGREEMENT ALSO REQUIRES YOU TO INDEMNIFY AND HOLD HARMLESS THE PERSONS RELEASED FROM ANY LOSSES, LIABILITIES, DAMAGES AND COSTS, INCLUDING REASONABLE ATTORNEYS' FEES.

ASSUMPTION AND ACKNOWLEDGMENT OF RISK

WARNING: CLIMBING IS DANGEROUS!!! I, the undersigned, acknowledge and agree that the use of the facilities, climbing walls or equipment of Vertical Endeavors, and the taking of classes or participating in activities sponsored by Vertical Endeavors has INHERENT RISKS. Those risks include, but are not limited to the following:

- 1. Injuries or death resulting from the failure or negligent misuse of the facilities, climbing walls or equipment of Vertical Endeavors.
2. Injuries resulting from slips, trips, falls sustained, or the physical demands associated with the use of the facilities, climbing walls or equipment of Vertical Endeavors.
3. Injuries resulting from the swinging or fall of other persons who may come into contact with me or from any swinging or falls in which I come into contact with other persons.
4. Injuries that occur from the NEGLIGENCE or lack of adequate training of those volunteers or employees of Vertical Endeavors, who seek to assist with medical or other help either before or after injuries have occurred.
5. Injuries resulting from the failure of equipment used at Vertical Endeavors, including but not limited to, failure of ropes, slings, harnesses, belay devices, handholds, anchor points, landing surface and its curbs, items left in landing surface and any other part of the climbing structure.
6. Injuries resulting from the NEGLIGENCE of the owners, operators, employees, or volunteer assistants of Vertical Endeavors, or the NEGLIGENCE of other climbers, visitors, or persons who may be present at Vertical Endeavors or the NEGLIGENCE of the designers, manufacturers or installers of the facilities, climbing walls or equipment, or the NEGLIGENCE of the landlord of Vertical Endeavors.

I am aware of these and NUMEROUS OTHER INHERENT RISKS in using climbing facilities, climbing walls or equipment. I FREELY AND VOLUNTARILY ASSUME COMPLETE RESPONSIBILITY for these risks and for the injuries that may occur as a result of these risks EVEN IF injuries occur in a manner that is not foreseeable at the time I sign this agreement. I realize that by voluntarily assuming the risks involved, I will be SOLELY RESPONSIBLE for any loss or damage I sustain, including PERSONAL INJURIES to me, damage to my PROPERTY, or damage arising out of my DEATH.

Initial (If participant is under 18, Parent/Legal Guardian must initial.)

RELEASE AND PROMISE NOT TO SUE

In consideration of my observing or using the facilities, climbing walls or equipment of Vertical Endeavors, and/or in consideration of my participating in the classes or activities sponsored by Vertical Endeavors, I hereby agree to RELEASE FROM ALL LIABILITY, DISCHARGE, and PROMISE NOT TO SUE, Vertical Endeavors, or any officer, director, member, employee, volunteer, or agent of Vertical Endeavors or any other climber, visitor, or person present in or using the facilities, climbing walls or equipment of Vertical Endeavors. It is my express purpose to bind myself, my heirs, my administrators and my executors hereby.

In consideration of my observing or using the facilities, climbing walls or equipment and/or in consideration of my participating in the classes or activities sponsored by Vertical Endeavors, I also hereby agree to RELEASE FROM ALL LIABILITY, DISCHARGE, and PROMISE NOT TO SUE the designers, manufacturers or installers of the facilities, climbing walls or equipment of Vertical Endeavors or the landlord of Vertical Endeavors. This agreement releases the aforementioned persons from any liability to me, my heirs, or next of kin, assigns, or personal representatives, for any losses or damages or claims or demands arising out of my PERSONAL INJURIES, damage to my PROPERTY, or from my DEATH.

If any provision of this Agreement is held invalid, the invalidity shall not affect other provisions of the Agreement which can be given effect without the invalid provisions, and to this end the provisions of the Agreement are to be severable. This Agreement shall be governed by the laws of the State of Minnesota.

Initial (If participant is under 18, Parent/Legal Guardian must initial.)

INDEMNIFICATION AGREEMENT

In consideration of my observing or using the facilities, climbing walls, or equipment of Vertical Endeavors, and/or in consideration of my participating in the classes or activities sponsored by Vertical Endeavors, I agree to indemnify and hold harmless the persons RELEASED and DISCHARGED by me from any loss, liability, damages or cost, including reasonable attorneys' fees, that they may incur due to the presence of any claims or actions by me, or by my heirs, next of kin, assigns, or personal representatives, arising out of my observing or using the facilities, climbing walls or equipment of Vertical Endeavors event.

Initial (If participant is under 18, Parent/Legal Guardian must initial.)

CLIMBING FACILITY RULES

The participant acknowledges that they have access to, and understand, the posted rules of the facility and agree to follow ALL rules of the climbing facility and to comply with the judgement of the climbing facility staff. Any infractions of the posted rules will result in loss of climbing privileges for that event.

Initial (If participant is under 18, Parent/Legal Guardian must initial.)

I HAVE READ THIS AGREEMENT THOROUGHLY AND UNDERSTAND THE TERMS. NO ORAL REPRESENTATIONS OR STATEMENTS OR INDUCEMENTS HAVE BEEN MADE TO ME THAT CHANGE, ALTER OR MODIFY ANYTHING WITHIN THE WRITTEN AGREEMENT. I AGREE TO SAID TERMS. (ALTERATIONS OR MODIFICATIONS TO THIS DOCUMENT ARE NOT ALLOWED)

Signature (If participant is under 18, Parent/Legal Guardian must sign.) I AM THE PARENT OR LEGAL GUARDIAN OF THE MINOR AND I AM SIGNING THIS RELEASE ON BEHALF OF THE MINOR.

Street (Print)

Date

City (Print) State Zip

Participants Birth Date Age

Phone Number

Emergency Contact Name Phone Number

Email Address

Do you know of, or have your been advised of, any medical conditions that the participant have that would prevent you from safely, participating in the activities of rock climbing and or belaying.

YES / NO - If YES, please describe:

Waiver Type: Daily - Punchcard - Free Pass - Belay Only - Lesson - Spectator - Group Chap - Kids Camp - School - Church - Misc. - B-day - Scouts - Other
EMPLOYEE INITIAL DATE ENTERED IN CLIMBERS EDGE BY *Office use only*