

HIGHER GROUND ROPES COURSE

Alpine Camp & Conference Center

APPLICANT INFORMATION AND RELEASE FORM

The Higher Ground Ropes Course applicant and release form must be signed with no additions, deletions or changes, for the participant to take part in the Higher Ground Ropes Course activities. We want to make sure you understand the risks in Ropes Course activities and have carefully thought through your willingness to participate.

Please Print:

Participant's Name: _____ **Date of Birth:** _____

Address: _____ **City:** _____ **Zip:** _____

Home Phone: () _____ **Business or Cell Phone:** () _____

E-mail Address: _____

Would you like to receive information on upcoming events at Alpine? _____

Do you have any health problem or disabilities that may affect your ability to participate in the Alpine Higher Ground Ropes Course Program?

If yes, please explain: _____

Please provide the following information in case of emergency:

Person to notify: _____ **Phone:** () _____

List allergies, if any: _____

Medication(s) currently taking: _____

Health/Medical Insurance Carrier: _____ **Policy #:** _____

Release Form: The Higher Ground Ropes Course program at Alpine Conference Center that you have signed up for involves physically and emotionally demanding activities in an outdoor setting. It includes climbing, jumping and other rigorous activities on natural and man made structures that are on the ground or at low, medium or high distances from the ground. You will be working with Higher Ground Ropes Course Instructors and with others in your group. It is possible that you may be injured while participating in the program. We want to make sure that you understand the risks of injury before you decide to participate in the program. **It is required that you read the following very carefully, make sure you understand it, and sign it on your behalf or on behalf of your minor child before participation in the program begins.**

RELEASE OF LIABILITY DECLARATION

I am fully aware that the Higher Ground Ropes Course at Alpine Conference Center program that I am choosing to participate in or allowing my child to participate in includes rigorous physical activities. I am also aware that there are risks of physical injury or harm from participating in the Higher Ground Ropes Course program. **I voluntarily elect to participate in the program or to have my child participate in the program and assume the risks of injury or harm that could result from that participation.** On my behalf, on behalf of my minor child, and on behalf of my personal representatives and heirs, I hereby forever release and discharge Higher Ground Ropes Course/Alpine Conference Center, it's owners, officers, employees, consultants, agents, and directors from all liability for any injury or harm to me or my child from participating in the Higher Ground Ropes Course program.

I have read and understand this release of liability and voluntarily sign it.

I hereby give permission to Higher Ground Ropes Course agents and employees, to administer basic first aid/or to seek appropriate medical assistance for my child or me if necessary. I also give permission to Alpine Conference Center to photograph and/or videotape myself or my child for use in any future promotional material without compensation.

Participant Signature (all participants must sign)

Date

Parent/Guardian Signature – if participant is younger than 18

Date

Name of Group Attending With