University of Idaho

Signatures on back of	page are	required	prior to	participation	in the Activit

College	Academic Affa	airs	Department	Honors Program					
Activity Name	Honors Progra 2021/2022	am Events	Date	August 19, 2021 though August 19, 2022		Location	ID, WA, OR, MT, WY		
Participant's Name	(First)		(Last)			(Age)	Gender:		
Address	(Home Address)			(City, State, Zip)					
Phone	(Home)				(E-mail)				
School & City	(School)				(City)				
Emergency contact(s)	NAME:				(Relationship)				
	PHONES:	WORK:	HOME:		CELL:				
PLEASE NOTE: Hospitals require proof of coverage before providing treatment unless a life threatening situation exists. Participant and									
participant's family is resp	oonsible for all	medical expense	es.						

## Acknowledgement of Risk and Waiver of Liability

Both participant and parent(s) / guardians must **read this Acknowledgement of Risk and Waiver of Liability carefully and in its entirety**. It is a binding legal document. Please read both sides of this page. Sign and return this form to the Honors Program Activity Coordinator. **If you are under the age of 18, this form must be signed by you as the participant AND by your parent or legal guardian.** 

I, the undersigned participant or parent/guardian, am aware that participation in Honors Program Events 2021/2022 ("Activity") may include activities that are risky and dangerous. Both participant and his/her parent(s) / guardian(s) ("I") acknowledge and accept the risks and give permission for my participation in the Activity. I acknowledge that participation in this Activity has the following non-exhaustive list of particular activities that bear risk and danger and from which bodily injury to myself, or my child, up to and including death, may occur: being in unfamiliar physical and social environments; physical and sporting activities related to archery, baseball, softball, basketball, bowling, boxing, dance, dodgeball, fencing, football, golf, gymnastics, aerobics, tumbling, and use of a trampoline, ice skating, ice hockey, inline skating, ping pong, tennis, badminton, pickle ball, running, self-defense, triathlons, swimming, car washes, volleyball, and ultimate Frisbee including, but not limited to batting, bouts, falling, lifting, lunges, bending, jogging, jumping, pulling, punching, running, sparing, stretching, swift unpredictable movement, throwing, tripping, twisting, continual aerobic movements, repetitive motion of limbs, and competition in and/or practice of activities that involve strenuous exertion or physical impacts that could place stress on cardiovascular and/or musculoskeletal systems and result in concussions. broken bones, facial trauma, loss of teeth, ear deformities, head injuries, eye injury, blindness, deafness, strain, sprains, joint injuries, heart malfunctions, head injuries, puncture wounds, and injury to internal organs; dehydration; contact with infectious diseases, equipment, or other participants; being struck by arrows, bow strings or protective arm guards; risk of severe injury or death while in the presences of moving vehicles and in the process of promoting Activity during traffic flow; slipping and falling on wet or icy surfaces; use of facilities with no supervision, coaching, or professional training; physical and outdoor activities related to camping, construction, cycling, backpacking, hiking, or outdoor survival, painting, kite boarding, soccer, skateboarding, snowshoeing, skiing, snowboarding and tag including, but not limited to bending, carrying heavy objects, falling, hammering, hiking, jumping, lifting, propelling, pulling, stretching, tripping, twisting, wading, and walking that involve strenuous exertion that could place stress on cardiovascular and/or musculo-skeletal systems and result in cuts, puncture wounds, broken bones, strain, sprains, joint injuries, heart malfunctions, eve injuries, and head injuries; burns; exposure to and contact with sharp objects, cleaning chemicals, paint; use or operation, by me or other with varying degrees of experience, of equipment including but not limited to power tools, saws, hammers, nails, and ladders by me or others with varying skill levels, of equipment and vehicles in the condition in which they are found; risks related to becoming entangled in ropes and kite; use of terrain outside of facilities boundary or defined area; avalanches; collisions with trees, lift towers, another skier or observer, and other obstructions; physical and social activities related to attending dances, new student functions, meals, meetings, presentations, campus tours, food preparation, musical performances, working in a food bank, washing vehicles including, but not limited to arm movements, falling, lifting, bending, jumping, pulling, and twisting involve strenuous exertion that could place stress on cardiovascular and/or musculo-skeletal systems and result in cuts, punctures, broken bones, strain, sprains, joint injuries, heart malfunctions, and head injuries; exposure to chemicals; risk of serious injury and disfigurement in the course of food preparation and cooking, including but not limited to

cuts and burns; use or operation, by myself or others, of equipment, including but not limited to knives or other sharp objects, cooking devices, and/or mixing utensils or machines; horseback Riding risks include, but are not limited to, those arising from control and performance of horses that, with or without warning or any apparent cause and regardless of previous training and past performance, could make unpredictable movements, including but not limited to, bucking, kicking, rearing, running, jumping obstacles, stumbling, rolling, falling, biting, pawing, stepping on or moving people or things; physical activities that may involve strenuous exertion that could place stress on cardiovascular and/or musculo-skeletal systems including but not limited controlling a horse while on the ground or riding, lifting, pulling, stretching, or jumping that could result in bone fractures, muscle strains and sprains, head injuries and heart malfunctions; activities supplemental to the Activity, such as loading and unloading animals from horse trailers, controlling animals while in unfamiliar area and around other animals; use or operation, by me or others with varying skill levels, of animals, and tack, in the condition in which they are found; watersports risk of severe injury or death in the course of white water, flat water and/or ocean kayaking or rafting activities; entering, exiting and operating the watercraft; objects which may be encountered in and out of the water, and which may not be obvious, including debris, trees, rocks, boulders, dams, bridges, and other hazards; the watercraft may overturn, swamp and sink and occupants may become separated from the craft; feet and other parts of the body maybe come entrapped in or under rocks and other objects; participants may strike or be struck by objects, other watercraft and other persons, in and outside of the watercraft; wading and boating in unpredictable and variable water flows and waterways; physical activities, related to kayaking or rafting including, but not limited to, lifting, bending, pulling, pushing, and propelling that would involve strenuous exertion that could place stress on cardiovascular and/or musculoskeletal systems and result in broken bones, strain, sprains, joint injuries, heart malfunctions, and head injuries; use or operation, by me or others with varying skill levels, of watercraft in the condition in which it is found; drowning; climbing risk of severe injury or death in the course of activities related to climbing, balancing on a tight rope or beam, weight bearing movements, and mountaineering; failure to tie appropriate climbing knots; failure to exercise proper belay techniques; bouldering: roped climbing; lead climbing; ice climbing; multi-pitch climbing; rappelling; and risks associated with being in the presence of other climbers which include, but not limited to, risk of dropped equipment, broken holds, and falling climbers; physical activities, including, but not limited to, lifting, pulling, and balancing body and gear weight and/or weight of other climbers, with no supervision, while on campus or off that would involve strenuous exertion that could place stress on cardiovascular and/or musculo-skeletal systems and result in broken bones, strain, sprains, joint injuries, heart malfunctions, and head injuries; field trips, including but not limited to hiking to mountainous Activity locations and outdoor team building exercises, on campus or off; activities supplemental to the Activity, such as walking, hiking, or climbing to and from sites of interest; risks related to transit to or from the Activity locations including, but not limited to, travel by airplane, private auto, rented auto, UI owned auto, bicycling, public transit, van, and walking or hiking, including travel in unpredictable or extreme weather conditions that affect the method of travel safety; use or operation, by me or others of equipment in the condition in which they are found; exposure to inclement weather including, but not limited to rain, sun, wind, snow, ice, fog, and extremes of heat or cold that could cause injury or illness including but not limited to heat exhaustion or stroke, sunburn, frost bite, hypothermia, and dehydration; contact with animals, insects, plants, biological hazards, environmental hazards; use of facilities, roads, sidewalks, parking lots, and trails that may or may not be properly maintained; activities supplemental to the Activity, such as walking or hiking to and from sites of interest; exposure to contaminated food and untreated water; risk related to the rendering or receipt of emergency first aid, or other emergency treatment, and transport in medical emergencies; accident or illness in locations without access to appropriate medical facilities or supplies; and other unknown and unanticipated activities and risks.

In consideration of the University of Idaho ("UI") permitting me/my dependent to participate in the Activity, I and my dependent hereby voluntarily accept all risks associated with participation. To the extent permitted by law, I agree to indemnify, defend, save, hold harmless, discharge and release the State of Idaho, the Regents of the University of Idaho, their agents and employees from any and all liability, claims, causes of action or demands of any kind and nature whatsoever that may arise out of or in connection with my participation in any activities related to the above-named Activity.

It is my express intent that this Acknowledgement of Risk and Waiver of Liability shall serve as a release, discharge and acceptance of risk for my heirs, estate, executor, administrator, assigns and all members of my family. The venue of any dispute that may arise out of my or my dependent's participation in the Activity, if the University is a party to the dispute, shall be in Latah County, Idaho.

I am aware that if I provide a vehicle not owned and operated by the University for transportation to, at, or from any Activity site, or if I am a passenger in such a vehicle, the University is not responsible for any damage or injury caused by or arising from my use of such transportation. Furthermore, I acknowledge that I am solely responsible for any action that I take that is outside the scope of the scheduled Activity, regardless if occurring before, during or after the period of the Activity. I acknowledge that the university makes no representation with respect to the safety of any personally owned vehicle in which I may travel, or with respect to the qualifications of the driver of any personally owned vehicle. I understand that if I choose to travel in a personally owned vehicle, it is my responsibility to determine the safety of the vehicle and qualifications of the driver.

I hereby certify that, with or without accommodation, I and/or my dependent is in good health and I know of no medical reason why I/he/she is not able to participate in this Activity. I hereby consent to first aid, emergency medical care and if necessary, admission to an accredited hospital when necessary for executing such care, for treatment for injuries or illness that I/he/she may sustain while participating in any activity associated with the above named Activity.

I understand that any insurance provided through this Activity provides only limited protection for injuries that occur while participating and that I am responsible for all medical expenses not covered by Activity insurance. Activity insurance is provided by an American Income Life camp accident policy.

If my dependent has a disability, food or drug allergy, dietary requirements, or any condition requiring accommodation, I will contact Disability Support Services (208) 885-6307 at least three weeks (21 days) prior to the start of the Activity.

Whether or not I am a student, I will abide by: the University of Idaho Student Code of Conduct, Articles II through IX at <u>www.webpages.uidaho.edu/fsh/2300.html</u>; the behavioral expectations of the Activity; and all applicable city, state and federal laws. My failure to do so may be considered grounds for denying my/my dependent's participation in the Activity.

I agree that you may photograph or video me or my child during, and in connection with, the Activity. I agree that you shall be the exclusive owner of all images and all copyright and other rights in the images. I agree that you may use any image in any media you wish related to the University of Idaho. If you <u>DO NOT</u> GIVE PERMISSION TO PRODUCE OR USE IMAGES YOU OR YOUR CHILD, CHECK HERE ().

I () do () do not **(please check one)** authorize the University of Idaho to use my or my child's/dependent's contact information to inform me/him/her of upcoming university events and activities.

Note: If participant is under 18 years of age, a parent/legal guardian must also sign and accept responsibility for the participant's actions and terms of the above agreement.

PARTICIPANT'S SIGNATURE	PARENT(S) / GUARDIAN(S) SIGNATURE
Participant's Name (PLEASE PRINT):	Parent/ Guardian Name (PLEASE PRINT):
Participant's Signature:	Parent/ Guardian Signature:
X	X
Date:	Date: