

University of Maryland CAMP SHULE Nyumburu Cultural Center

Use of UM Facilities and Equipment

PARENTAL RELEASE AND PARENTAL INFORMED CONSENT FORM

In consideration of the University of Maryland's (UMD) acceptance of my minor child for participation in a University recognized Day Camp Program, including the use of University facilities and equipment, I, on behalf of said minor child and myself, our heirs, personal representative(s) and assigns hereby represent and agree as follows:

1. I acknowledge that I have been provided with information regarding the UMD, including its activities, policies, and procedures. I understand that the camp program includes various recreational and adventure activities, sports, and swimming, as well as the CRS rock climbing wall and ropes challenge course. NOTE: The CRS rock climbing wall and ropes challenge course consist of a number of activity elements that range from 2 feet to over 50 feet off the ground, including a 50' high ropes alpine tower, a 55' climbing wall, and a giant swing. Participation in climbing wall and challenge course activities is limited to children who are big enough to fit into the required safety equipment (harness and helmet). Alternative adventure activities will be provided for children who do not participate in the climbing wall and challenge course.
2. I understand and agree that my child must abide by all rules, regulations, expectations and standards of conduct applicable to participation in the UMD Camp Program. I further understand and agree that the University of MD reserves the right to suspend, limit or terminate my child's participation in any activity, or in the UMD Program if, in the sole discretion of UMD staff, my child's conduct or actions do not conform to said rules, regulations, expectations, and standards of conduct or are otherwise dangerous, destructive, or disruptive.
3. I understand that the UMD Camp Program requires a minimum level of fitness and skill for safe participation. I also understand that the UMD advises that participants in their Camp Programs have a physical examination to determine their fitness for participation. I further understand that the UMD does NOT provide medical, health or other insurance for participants in the UMD Camp Programs.
4. Should my child require first aid or emergency treatment as a result of illness or injury associated with participation in the UMD Camp Program, I consent to such first aid or treatment.
5. I fully recognize and understand that there are risks and hazards, both minor and serious, associated with participation in the UMD Camp Program and/or use of other university facilities and equipment, including, but not limited to: cuts, scrapes, bruises, broken bones, muscle strains, pulls or tears, other bodily injuries, spinal injuries, heat prostration, brain damage, blindness, deafness, drowning, heart attacks, temporary or permanent disabilities, paralysis and, even, death.
6. Knowing the dangers, hazards and risks associated with participation in the UMD Camp Program, and with sufficient knowledge of my child's physical condition(s) and limitations, if any, I voluntarily assume all responsibility and risk of loss, damage, illness and/or injury to person or property which my child may, in any way sustain in connection with his/her participation in the UMD Camp Program.
7. To the fullest extent permitted by law, I hereby release and forever discharge, and agree not to sue and to indemnify and hold harmless, the State of Maryland, the UMD, and their officers, agents, employees and volunteers from and against any and all liabilities, claims, demands and causes of action of any kind on account of any loss, damage, illness or injury to person or property in any way arising out of or relating to my child's participation in the UMD Camp Program and/or use of CRS or other university equipment or facilities, whether due to the negligence, default or other action or inaction of any person or entity.

I CERTIFY THAT I AM 18 YEARS OF AGE OR OLDER AND THAT I HAVE READ AND FULLY UNDERSTAND THIS RELEASE AND INFORMED CONSENT FORM, AND I SIGN IT VOLUNTARILY WITH FULL KNOWLEDGE OF ITS SIGNIFICANCE.

Signature of Parent/Guardian Having Care and Custody of Participating Child

Date

Printed Name of Parent/Guardian

Printed name of Participating Child
