

CONDOR CHALLENGE



CHALLENGE COURSE & CLIMBING TOWER

RELEASE OF LIABILITY AND INFORMED CONSENT PLEASE READ CAREFULLY

I acknowledge that I am being given the opportunity to participate in the Condor Challenge Climbing Tower and/or High / Low Ropes Course provided by the California Living Museum (CALM). I understand that the Condor Challenge utilizes many experiential events and activities. Participation in the Condor Challenge exposes me to activities that can be physically and mentally challenging, and involves an element of risk, both actual and perceived. Whereas CALM has done everything possible to make these activities safe in all regards, there remains the possibility of potential injury to others and myself.

I understand that CALM is responsible for the safe and professional presentation of all events and activities and that they will be held liable if any injury or accident occurs as a result of their gross negligence or willful misconduct. However, I also realize the need for me to be accountable for my own safety and well being and that I am an integral part of ensuring my own safety. **I agree to follow all staff instructions and directions, especially as they relate to safety, and to maintain the awareness of the need for safety at all times.**

I realize that the choice regarding my level of participation in these activities rests solely with me and that I am not nor will I be forced to participate in any particular activity. If I do choose to participate in Condor Challenge activities, I do so after careful consideration of my own physical health, abilities and mental condition, and my participation in any of these activities is my choice and is completely voluntary. I will disclose all medical conditions and physical activity concerns that may limit my participation to the CALM Condor Challenge staff or the event director. Any such disclosure will be held in strict confidence and will not be shared with my employer or other participants.

In acknowledgement of the importance of being fully responsible for my current state of health and well being, I will check the applicable numbers below.

- 1. I have some concerns about my physical participation in these activities and have consulted with my physician regarding my level of participation.
- 2. I have some concerns about my physical participation in these activities and have consulted with one of the program staff.
- 3. I have no concerns about my physical participation in these activities.

In consideration of receiving permission to take part in this program, I release and will hold harmless CALM, the CALM Foundation, and the Kern County Superintendent of Schools, their owners, contractors and employees (collectively, the "Released Parties") from any and all claims I might have as a result of my participation in the Condor Challenge, including without limitation all physical, mental and emotional injuries, UNLESS those injuries or damages are caused by the gross negligence or the willful misconduct of CALM staff.

Any medical and/or accident expenses or insurance claims I incur or file must be covered by my family, my employer, or me. I further agree to indemnify the Released Parties for any claim whatsoever brought by a third party, which I may cause.

I HAVE CAREFULLY READ THE FOREGOING LIABILITY RELEASE AND UNDERSTAND ITS CONTENTS.

X _____
Signature of Participant

X _____
Print name of Participant

Date

IF UNDER 18 YEARS OF AGE GUARDIAN MUST SIGN BELOW:

X _____
Signature of Guardian

X _____
Print name of Guardian

Date

THANK YOU AND WE HOPE YOU ENJOY THE CONDOR CHALLENGE AT CALM!

