

YMCA Camp Jones Gulch Leadership Ventures Programs  
Application/Release Form—please print in ink.

Program: Leadership Ventures at Camp Jones Gulch Date: \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Nickname \_\_\_\_\_  
*(for name tags)*

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Grade \_\_\_\_\_ Organization: **Kiwanis Key Leaders**

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_

Alternate Emergency Contact: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

**An Introduction to Leadership Ventures Adventure Programs**

Since 1977 Pro-Action Associates has provided experiential programs for a wide variety of people at the Jones Gulch facility. In agreement with Pro Action, YMCA Camp Jones Gulch has agreed to assume responsibility for the ropes course and to continue to provide the same quality programs to its customers. Our programs are outdoor adventure based experiences.

We take pride in the quality of our services and are excited by this opportunity to serve you. We work hard to maximize your experience while minimizing your physical risk, and yet, inherent risks do exist in hands-on, experiential programs. Throughout the program you are informed in detail about any safety considerations.

**High Ropes Course Participants(involving harnesses and belay devices): MUST be at least 12 years of age or currently the appropriate grade(6<sup>th</sup>). At no time is your participation mandatory. You are encouraged to participate at a level that is appropriate for you and your colleagues. With this in mind, please read and sign the following:**

**Assumption of Risk**

In consideration of the services of the YMCA of San Francisco and YMCA Camp Jones Gulch, their officers, agents, employees, and all other persons or entities associated with each of them (hereinafter collectively referred to as YMCA), I agree as follows:

I am aware that this program entails risk, including, but not limited to, the possibility of slips and falls, rope burns, pinches, scrapes, twists and jolts that could result in scratches, bruises, sprains, lacerations, fractures, concussions, or, in extreme cases, even death. I agree to assume responsibility for the risks identified herein and those risks not specifically identified. I certify that I am fully capable of participating in this program. I agree to assume full responsibility for any loss, injury or inconveniences that I (or any minor on whose behalf I am signing this release) might suffer as a result of participation in the program. I also agree that the terms hereof shall serve as a release and assumption of risk for my heirs, executors and administrators, and for all members of my family.

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ SIGNATURE of Participant: \_\_\_\_\_

**If under 18, the signature of a parent or legal guardian is also required:**

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ SIGNATURE of Legal Guardian: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

Required for all Programs and Services at YMCA Camp Jones Gulch

IN CONSIDERATION of being permitted to utilize the facilities, services and programs of the YMCA (or for my children to so participate) for any purpose, including, but not limited to observation or use of facilities or equipment, or participation in any off-site program affiliated with the YMCA, the undersigned, for himself or herself and such participating children and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will, inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgment that such premises and all facilities and equipment therein and such affiliated program have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use or participation by the undersigned and such children.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE INCLUDING, BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY OFF-SITE PROGRAM AFFILIATED WITH THE YMCA, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED, ON HIS OR HER BEHALF AND BEHALF OF SUCH CHILDREN, HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the YMCA, its directors, officers, employees, and agents (hereinafter referred to as "releasees") from all liability to the undersigned or such children and all his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefor on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releasees or otherwise while the undersigned or such children is in, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with the YMCA.

2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any loss, liability, damage or cost they may incur due to the presence of the undersigned or such children in, upon or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA whether caused by the negligence of the releasees or otherwise.

3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE to the undersigned or such children due to negligence of releasees or otherwise while in, about or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA.

4. THE UNDERSIGNED HEREBY GIVES PERMISSION for the YMCA of San Francisco, or any of its branches, to use any photographs or video footage taken of the undersigned and/or the undersigned's children participating in YMCA of San Francisco activities in future YMCA promotional purposes, without additional release or authorization.

5. THE UNDERSIGNED further expressly agrees that the foregoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements or inducement apart from the foregoing written agreement have been made.

I HAVE READ THIS RELEASE.

Adult Participant

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature of Adult Participant

Print Name of Adult Participant

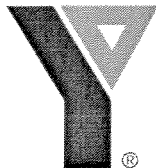
- OR -

Youth/Family Participant(s)

Signature of Parent/Guardian

Print Name of Parent/Guardian

Print Name(s) of Child(ren) in Program:



Three horizontal lines for printing the name(s) of the child(ren) in the program.