

# FSU Campus Recreation FSU CHALLENGE

## Statement of Voluntary Consent, General Release, And Waiver of Liability

(For Individual Participant Signature or Parent/Guardian if participant is under age 18)

In consideration of my or my minor child's participation in The Florida State University's **FSU Challenge Course** activities and having actual knowledge and appreciation of the particulars of the program and those risks involved in this type of activity, I voluntarily consent to my or my minor child's participation in the program, and assume the risks arising therefrom.

In consenting my or my minor child's participation in the **FSU Challenge Course**, I acknowledge that I have been given information about the activities, risk levels and specific guidelines associated with the course, for my independent review and understanding of the course requirements.

I HEREBY CONSENT, declare and represent, as evidenced by my signature below, that I am on notice that The Florida State University has no medical, health or hospitalization insurance to cover me or my minor child in the event of accident, injury, illness or death, and hereby specifically release and hold harmless The Florida State University, the Florida State University Board of Trustees, and the Florida Board of Education, and the Florida Board of Governors, their agents, employees, representatives and personnel, from any and all liability connected with the **FSU Challenge Course** activities and assume any and all risks, liabilities and responsibilities for all accidents, injuries, damages or property losses arising there from. Furthermore, I acknowledge that it has been strongly recommended to me that I obtain my own, or in the event of my minor children, his or her own health, medical and/or hospitalization insurance prior to participating in the **FSU Challenge Course**.

I hereby declare and represent that in making, executing, and tendering this Statement of Voluntary Consent, General Release, and Waiver of Liability, I fully understand and acknowledge that I am relying wholly upon my own judgment, belief and knowledge of the circumstances involved in my or my minor child's participation in the **FSU Challenge Course**, and that I have read this statement, understood its contents and voluntarily executed it of my free will and choice.

\_\_\_\_\_  
Group Name

\_\_\_\_\_  
Participant Name/Print

**Signature:** \_\_\_\_\_  
Participant or Parent/Guardian (if participant is under 18)

**Date:** \_\_\_\_\_  
Mo./Day/Yr.

### Photo/Media Release:

I \_\_\_\_\_ grant **FSU Challenge Course** and persons acting for or through them, the right to use, reproduce, assign and/or distribute photographs, films, videotapes, and sound recordings of me or my minor child for use in materials they may create.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

