



DEPARTMENT OF COMMUNITY SERVICES

Rock Wall Release, Waiver and Assumption of Risk

I, the undersigned, acknowledge and agree that observing or participating in the rock wall climbing activities with the **Department of Community Services**, has INHERENT RISKS. Those risks include but are not limited to:

1. Injuries resulting from falling, including but not limited to, falling into other persons, falling and coming into contact with the rock wall, structures or cables, or falling to the ground, whether accidental or related to Auto-Belay failure.
2. Injuries that occur from **NEGLIGENCE** or lack of adequate training.
3. Injuries or death resulting from the failure or negligent misuse of the climbing equipment provided for the activity.
4. Injuries or death resulting from the failure of equipment, or poor design or placement of any equipment, including but not being limited to cables, carabiners, harnesses, bolt hangers, and Auto-Belay systems.

I understand that instructions given by instructors from the **Department of Community Services** is important for my safety, and I agree to follow all instructions, and to ask for assistance if I do not understand such instructions.

I assume complete responsibility for those risks and the injuries that may occur as a result of those risks even if injuries occur in a manner that is not foreseeable at the time of signing this agreement. I realize that by voluntarily assuming the risks involved, I will be solely responsible for any loss or damages I sustain, including personal injuries, property damage or damage arising out of death.

I am aware of the risks involved and all other inherent risks in observing and or participating in the activities offered or sponsored by the **Department of Community Services**. On behalf of myself, my family, executors, heirs, and administrators, I willingly and knowingly assume complete responsibility for all risks of physical injury in any way related to the activities involved, and I hereby release the **Department of Community Services**, their members, officers, directors, employees, volunteers, independent contractors and agents from any and all liability arising out of the rock wall climbing activities.

This agreement is legally binding. By signing this form, you give up your right to recover compensation through the courts or otherwise, for any personal injury, death or damage to personal property being caused by negligence, accident or otherwise.

I HAVE READ, I UNDERSTAND AND I AGREE TO THE ABOVE CONDITIONS.

Name: _____ Age: _____

Signature: _____ Date: _____

Signature of Parent/Legal Guardian (if participant is under 18): _____