

PERMISSION AGREEMENT, RELEASE AND WAIVER OF LIABILITY

Outdoor Adventures

Presented by Louisa 4-H County Council for Louisa 4-H members and a friend who have completed 4-6th grade. This one-day retreat will be on June 24th, 2023 from 10 am-10 pm at Langwood Education Center. Participants will do teambuilding with low ropes, fishing, canoeing/kayaking, nature walk, building a fire, cooking over fire, and more.

Participant Name: (print) _____
Participant Age: _____
Parent Name: (if participant is under 18) _____
Club Name: _____
Location of Activity: _____
Date of Activity: _____

Permission, Release and Waiver of Liability

This Agreement and Release and Waiver of Liability shall be governed by and construed under the laws of the State of Iowa, which shall be the forum for any lawsuits arising from or incident to this Agreement.

In consideration for being allowed to participate in the Outdoor Adventures (the “Activity”), **I voluntarily agree to assume all risks of my or my child’s participation in the activity.** I understand that participating in Canoeing/Kayaking/, Fishing, Hiking, Campfires, Ropes/Challenge course, exposure to animals/wildllife, and other water and physical activities will expose me to above normal risks of injury or harm. These risks include but are not limited to: uneven or hazardous facilities and locations, physical contact or collisions with other participants, bad-decision making, inattention of other campers, misuse or failure of equipment; concussions, overexertion, overheating; blisters; sprains, strains, dislocations, torn muscles and/or ligaments; fractured or broken bones; eye damage; cuts, wounds, scrapes, abrasions and/or contusions; dehydration; burns, medical illnesses; head, neck, and/or spinal injuries; bite or attack by an animal, insect or marine life; allergic reaction, shock, paralysis or death; injuries from my or my child’s lack of fitness or conditioning; and serious injury or impairment to other aspects of my or my child’s body and general health and well-being. I understand that the activities of canoeing, kayaking, fishing, hiking, and other physical activity are inherently hazardous and may result in injury to me or my child or other participants. I understand that by participating in the activity, **I expose myself and/or my child to the risk of injuries including but not limited to outdoor allergens, sunburn, dizziness, heart attack, stroke, temporary or permanent muscle soreness, sprains, strains, cuts, abrasions, bruises, burns, ligament and/or cartilage damage, head, neck, or spinal injuries, loss of use of arms and/or legs, eye damage, drowning, disfigurement or death.** I also recognize that there are both foreseeable and unforeseeable risks of injury or death that may occur as a result of my or my child’s participation in the Activity which cannot be specifically listed. Further, I recognize that the actions of other people either affiliated or not affiliated with the event organizers may cause harm or loss to my or my child’s person or property.

Please read additional information and provide signatures of permission on other side of this page.

Health Requirements. Participant must be healthy and reasonably fit to safely participate in outdoor and indoor physical activities. I understand that participating in the Outdoor Adventures activities may involve strenuous physical activity and will expose me or my child to above normal risks of injury or harm. I certify that I and/or my child am/is in good health and have no mental or physical conditions or symptoms that could interfere with my safety or the safety of others while participating in the activities of the Outdoor Adventures. I understand and agree that I alone am responsible to determine whether I/my child is physically and mentally fit to participate in this activity. To the extent I have questions or need information about my/my child's physical or mental condition or limitations, I agree to seek professional advice from a qualified physician.

I, _____ (participant or parent or guardian if participant is under age 18) give my permission for the above named individuals to participate in the Outdoor Adventures I hereby **RELEASE FROM LIABILITY, IMDEMNIFY, and HOLD HARMLESS** the State of Iowa, Board of Regents of the State of Iowa, Iowa State University, ISU Extension and Outreach, and Louisa County Agricultural Extension District , and Louisa County Conservation Board and any of the officers, servants, agents and employees of the above-mentioned entities (hereinafter referred to as **RELEASEES**) for any liability, claim and/or cause of action arising out of or related to any loss, damage or injury, including death, costs or other expenses or liabilities incurred by me and anyone accompanying me, (including minors I am responsible for during this event), that occurs as a result of my or my child's voluntary participation in this program. This release, however, is not intended to release the above-mentioned **RELEASEES** from liability arising out of their sole negligence.

BY SIGNING THIS RELEASE AND WAIVER OF LIABILITY, I STATE THAT I HAVE READ AND UNDERSTAND THE CONDITIONS SET FORTH IN THIS RELEASE AND THAT I AGREE TO ALL CONDITIONS SET FORTH HEREIN, AND THAT I SIGN THIS VOLUNTARILY.

Date

Participant Name (please print)

Participant Signature

Signature of Parent or Guardian (if Participant is under age 18)

NOTE: This Agreement and Release and Waiver of Liability must be signed by both the participant and the participant's legal guardian if the participant is not EIGHTEEN (18) YEARS OLD