

Sherman Lake YMCA Outdoor Center  
Activity Release Form

Name: \_\_\_\_\_ Phone # \_\_\_\_\_

Address: \_\_\_\_\_

**PLEASE READ:** This form is intended to remind participants of the seriousness of attempting adventure activities with an old, preexisting injury, a heart condition, or other condition which may be aggravated by the event.

**QUESTIONS:**

1. Any preexisting injuries (ankles, knees, back, neck, etc) which may be aggravated by participating?
2. Are you currently taking any medications?
3. Any heart condition or heart medications?
4. Do you have high blood pressure?
5. Do you have any allergies (food, bees, and insects) or reactions to any medications?
6. Do you have any physical limitations?
7. Current level of activity at home?

**RESPONSE:**

Yes	No
Yes	No
Yes	No
Yes	No
Yes	No
Yes	No

Low      Med      High

***If you answered YES to any of these questions, please discuss them with you team leader.***

**RELEASE OF LIABILITY AND AUTHORIZATION FOR TREATMENT**

I hereby grant permission for me or my child to participate in the Wall, Rafters, Tower, Spaghetti Course, Courage Course, or any other activity at the Sherman Lake YMCA Outdoor Center. Any health concerns or considerations that I have are listed above. I hereby give my permission to the medical personnel selected by the camp staff to order x-rays, routine tests, treatment and necessary transportation for myself or my child. In the event that I cannot be reached in an emergency, I hereby give my permission to the physician selected by the camp staff to secure and administer treatment, including hospitalization. In consideration for being allowed to participate in the YMCA's programs, I agree to assume the risk of such activities and program, and I further agree to hold harmless the YMCA and its' staff members conducting the activities from any and all claims, suits, losses or other related causes of action for damages, including but not limited to such claims that may result from injury or death, accident or otherwise during or arising in any way from the activities. The YMCA is not responsible for lost, stolen, or damaged personal articles. I also authorize the YMCA to have and use photographs, slides, or videotapes of me, my child or my family as may be needed for public relations programs. I acknowledge that this General Release of Liability of the YMCA is binding on me personally and on my heirs, personal representatives, successors and assigns.

**Signature of Participant:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**In case of emergency contact:**

\_\_\_\_\_ **Phone #**