Assumption of Risk Form

TRIP DATES (Leave / Return) __________________ / ______________________

LOCATION: Bloomington Canyon, Idaho

Important note
Before signing, carefully read all the statements on this form. Trip leader must initial and sign, full group must sign the second page.

Risk Waiver
In consideration for my being permitted by the Weber State University Outdoor Program facilities and/or services, I agree to the following waiver and release:

I acknowledge that backcountry and wilderness travel have inherent risks and hazards that cannot be eliminated, particularly in an unpatrolled wilderness environment in mountainous terrain. I understand and agree that accidents or illnesses can occur in remote places without immediate medical help and are compounded with the risk of exposure to temperature extremes, inclement weather, unpredictable snow conditions and avalanches. I am voluntarily using facilities and/or services of the WSU Outdoor Program with full knowledge of the inherent risks, hazards, and dangers involved and hereby assume and accept any and all risk of injury, paralysis, or death.

PLEASE INITIAL__________________________
____________________________________

I have read and fully understand the policies and procedure document associated with the Bloomington Canyon Yurt Rental.

PLEASE INITIAL__________________________________________________________________________

Furthermore, I accept as my duty not to:
Use any WSU Outdoor Program equipment, facilities or services unless I have the ability to use them safely without instruction, or until I have requested and received sufficient instruction to permit safe usage.

I further understand that the WSU Outdoor program reserves the right to refuse service to any person it judges to be incapable of meeting the rigors and requirements of participation in the yurt rental service.

PLEASE INITIAL__________________________________________________________________________

Lastly, I, for myself, my heirs, successors, executors and subrogors, hereby knowingly and intentionally, waive and release indemnify and hold harmless the State of Utah, Weber State University, Weber State University Outdoor Program, and the US Forest Service and their employees and volunteers and other participants from and against any and all claims, actions, causes of action, liabilities, suits, and expenses (including reasonable attorney’s fees) arising directly or indirectly out of any damage, loss, injury, paralysis, or death to me or my property as a result of my participation in this program, my use of the yurt, my own negligence, or as a result of the risks inherent in this activity. I, for my heirs, successors, my executors, subrogors, and myself further agree not to sue the State of Utah, Weber State University Outdoor Program, and the US Forest Service and their employees and volunteers and other participants.

PLEASE INITIAL__________________________________________________________________________
I have carefully read, clearly understand and voluntarily sign the attached Use, Waiver, and Release Agreement.

Please sign and include emergency contact numbers.  

1. Group Leader ____________________ WSU / Non, W#__________ Emergency contact #____________

2. Participant ______________________ WSU / Non, W#__________ Emergency contact #____________

3. Participant ______________________ WSU / Non, W#__________ Emergency contact #____________

4. Participant ______________________ WSU / Non, W#__________ Emergency contact #____________

5. Participant ______________________ WSU / Non, W#__________ Emergency contact #____________

6. Participant ______________________ WSU / Non, W#__________ Emergency contact #____________

7. Participant ______________________ WSU / Non, W#__________ Emergency contact #____________

8. Participant ______________________ WSU / Non, W#__________ Emergency contact #____________

9. Participant ______________________ WSU / Non, W#__________ Emergency contact #____________

10. Participant _______________________ WSU / Non, W#__________ Emergency contact #____________

11. Participant _______________________ WSU / Non, W#__________ Emergency contact #____________

12. Participant _______________________ WSU / Non, W#__________ Emergency contact #____________

Vehicle Information

1. Vehicle Make ____________________ License Plate # ____________ State ______

2. Vehicle Make ____________________ License Plate # ____________ State ______

3. Vehicle Make ____________________ License Plate # ____________ State ______

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