Challenge Participant Agreement

This is a legally binding release, waiver, indemnification of liability, and express assumption of risk.

Please read this form carefully, fill in all blanks before signing.

☐ I (parent of minor child)__________________________________________________________
participant/minor’s name, ____________________________, hereby affirm that I have read
this document in its entirety. By my signature below, I agree to each-and-every term and
condition of this document.

☐ I (adult participant), ____________________________, hereby affirm that I have read
this document in its entirety. By my signature below, I agree to each-and-every term and
condition of this document.

By choosing to participate in Girl Scouts of the Chesapeake Bay (GSCB)’s elements challenge
course (zipline and high ropes - hereafter referred to as an “event”). I/My child understand that
participation carries inherent risks and dangers. These events involve climbing and swinging, risk
factors include, but are not limited to: scratches, cuts, bug bites, strains, sprains, broken bones,
personal damage, injury, paralysis, loss, death, or property damage and loss. I understand that
the risks mentioned above are examples only and that there are numerous other risks inherent in
these activities to which I may be exposed. In the event of possible injury, I authorize GSCB to
authorize the administration of medical care.

I/My child agree that I have met and completed all prerequisites to competently participate in this
event which includes: signing of the Challenge Participant Agreement. I am unaware of any
physical or mental condition that would a) prevent me from safely participating in the event or b)
endanger my health or safety or the health and safety of others due to my participation. I attest
all of my questions regarding this event, have been answered to my satisfaction.

In consideration of being permitted to participate in any way in the GSCB challenge elements
zipline and high ropes course, I, on behalf of myself/my child, my family, heirs, successors,
assigns, or anyone claiming interest through me, do hereby knowingly, intentionally, and
voluntarily release, waive, discharge, and agree to hold harmless Girl Scouts of the Chesapeake
Bay, employees, and certified volunteer facilitators (collectively referred to as "released parties")
from all actions, claims, damages, and liability (including attorney fees and costs) that I, my
family, heirs, successors, assigns, and anyone claiming interest through me, may have for any
damage, injury, paralysis, loss, or death to myself or any other person or property arising out of
my participation in this event, whether such damage, injury, paralysis, loss, or death results from
negligence of any of the Related Parties or from some other cause.
I/My child hereby agree to indemnify all of the above named Released Parties for any and all claims, including attorney fees and costs, which may be brought against any or all of the Released Parties by anyone claiming to have been injured as a result of any injury, including death, to me or my property which may occur as a result of my participation in this event.

I/My child have read and understand that this release, waiver, indemnification of liability, and express assumption of risk, and sign this document on behalf of myself and my heirs with the intent to release, waive, and indemnify all of the Released Parties, whether passive or active and to personally assume all risk of injury or death.

I/My child understand that this waiver is valid, unless revoked, for one year from date of signing.

I/My child hereby assert that my participation is voluntary and that I knowingly assume all such risks. I understand that I signed this document as my own free act and deed; no oral representations, statements, or inducements apart from the foregoing written statement, have been made.

I/My child further agree that this document will be interpreted in accordance with the laws of the state of Maryland. If any term or provision of this document shall be held illegal, unenforceable, or in conflict with any law governing this document, the validity of the remaining portions shall not be affected.

Participant’s Full Name: ____________________________________________

Participant Signature: ____________________________________________  (signature of parent/guardian if under 18 years of age)

Date: ___________________________________________________________________

Emergency Contact Name: ____________________________________________

Emergency Contact Phone: ____________________________________________