## **HIGH ROPES**





SCHOOL / COMPANY / GROUP NAME: (IF APPLICABLE)	OFFICE USE ONLY:
	Session Date:
If completing below on behalf of a participant who is under 18 years of age.	Session Time:
I declare that I am over 18 years of age and the parent/guardian of a child/children in the group or, if not, I have authority from the child(ren)'s parent(s) or guardian(s) to confirm consent on their behalf	Lead Instructor:

## THIS IS AN IMPORTANT DOCUMENT: YOU MUST READ IT BEFORE COMPLETING

PARTICIPANTS MUST BE A MINIMUM OF 8 YEARS OLD, 130CM HIGH AND WEIGH LESS THAN 120KG. AT LEAST ONE PARENT/GUARDIAN MUST REMAIN ON SITE WHILE THEIR CHILD/CHILDREN ARE PARTICIPATING ON THE HIGH ROPES COURSE.

- 1. I am 8+ years (8-9 years with an accompanying paying adult over 18yrs) and wish to undertake the High Ropes course organised by Out of Bounds.
- 2. I agree that I am responsible for my own safety and that of any under 18 year olds that I have signed responsibility for.
- 3. I undertake to ensure that I, she/he/they have read, understand, will follow and undertake the Activity in accordance with Out of Bound's applicable Safety Rules of Participation, available online and or at the Activity, and the oral instructions given to me before undertaking, and any instructions during the Activity
- 4. I understand that the High Ropes course consists of a physically demanding aerial obstacle course and there will be risk of injury when participating. Legs can be vulnerable to injury on the zip wire landings and hands can be injured on the ropes and apparatus.
- 5. I understand that I must be attached to the safety system at all times and that should I disconnect from the safety system I am at risk of a fall from height. Adults supervising participants are responsible for ensuring participants are adhering to the methods of attachment provided, in accordance with the Safety Rules. With any physical activity there remains a degree of risk even when the Safety Rules are followed, and the activity can be physically, mentally and emotionally demanding.
- 6. I understand that participation in the High Ropes Activity Course exposes me to certain risks. The risk of personal and property injury, including, among others permanent disability and death exists by reason of the potential for slips, falls, collisions and contact with other participants and fixed or moving objects or equipment, exposure to environmental conditions, heart attacks or other cardiovascular events, unpredictable forces of nature or otherwise.
- 7. I certify that I am aware of the weight, height, age, and medical restrictions applicable to the Activity I am participating in and confirm that I meet each of those requirements and am in reasonably good medical condition. I understand that failure to abide by these restrictions can create a significant increase of risk of harm to myself, other participants, and employees of Out of Bounds.
- 8. If assuming responsibility for any under 18 year old to accompany and supervise, I declare that I am 18 years or older. I declare that if I am not the child(ren's) parent or guardian I have the authority of the parent or guardian to complete the **Risk Acknowledgement and Disclaimer**.
- 9. I am voluntarily participating in the High Ropes Activity Course with the knowledge of the dangers involved and I agree to accept any and all risks of loss, injury or death. In the event of an accident, of loss or damage to personal effects to myself and of children in my care, I acknowledge that Out of Bounds will not be liable for any direct or indirect loss, damage or injury arising from or in connection with the High Ropes Course and all surrounding areas. I waive all and any claims against Out of Bounds in this respect, both for myself and/or for the children in my care.
- 10. I certify that to the best of my knowledge neither I nor any children in my care have a medical condition which might make me or him/her/them more likely to sustain an injury. I agree to participate in the Activity only to the extent of my skill level and physical and medical condition, and understand that I am solely responsible for determining this. I do not have a pre-existing injury or underlying physical or medical condition that would increase the likelihood of injury, illness or death as a result of participation. To the best of my knowledge I and any children in my care are not pregnant.
- 11. I confirm that I am not under the adverse influence of drink or drugs.
- 12. I grant Out of Bounds the right to take photographs/videos of me in connection with my participation in the Activit(ies), and convey all rights, title and interest in and to the same to Out of Bounds. I authorise Out of Bounds to copyright, use, and publish the same in print and/or electronically, and agree to its use for any lawful purpose, including but not limited to publicity, illustration, advertising, and web content. I authorise Out of Bounds to use my email for promotional and other commercial purposes unless and until I opt-out by writing to info@oofb.co.uk. I have read and agree to Out of Bound's privacy policy at www.out-of-bounds.co.uk.

I acknowledge that I and the child(ren) in my care (if applicable) have read and understood the Safety Rules of Participation in relation to the High Ropes Activity Course.

STAFF USE	NO.	CLIMBER'S NAME (PLEASE PRINT FIRST AND LAST NAMES)	PARENT/GUARDIAN/AUTHORISED CONSENT NAME (PLEASE PRINT)
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TOTAL	CHECKED BY: