## CLIMBING WALL PARTICIPANTS LIABILITY RELEASE

In consideration for receiving permission to participate on the climbing wall, I hereby **release**, **waive**, **discharge**, **and covenant not to sue** Ferris State University, their officers, employees, agents, representatives, staff, and volunteers (hereinafter referred to as **releasees**) from any and all liability, claims, demands, actions, and causes of action whatsoever arising out of or related to any loss, damage, or injury (including death) sustained by me or any property belonging to me, **whether caused by the negligence of the releasees**, or otherwise while participating on the climbing wall, or in, on, or upon the premises where the activity is being conducted.

I fully understand that the climbing wall is physically demanding and it involves substantial risk of bodily injury and personal property damage. I agree to participate and abide by the **climbing wall policies & procedures**. Any questions I had concerning my participation in this activity have been fully answered. Because of the dangers of participating in the above activity, I recognize the importance of following staff/supervisor instructions regarding proper climbing techniques, safety, facility policies, etc., and agree to obey such instruction.

In consideration of the opportunity provided by Ferris State University to participate on the climbing wall, I do hereby assume all the risks associated with participation and agree to hold Ferris State University and its releasees harmless from any and all liability, actions, causes of action, debts, claims, or demands of any kind and nature whatsoever which may arise by or in connection with my participation in any activities related to the climbing wall. The terms hereof shall serve as a release and assumption of risk for my heirs, estate, executor, administrator, assignees, and for all members of my family.

| Participant Name:  |   | Date of Birth:   |
|--------------------|---|--|
| Add                | dress:  |  |
| Pho                | one:  |  |
| Signature:         |   | Date:  |
| MINOR PARTICIPANTS | University's University Recreation de facilities, I further agree to indemnit | (minor participant) being permitted by Ferris State partment to participate in its activities and to use its equipment and by and hold harmless Ferris State University and its University Recreation which are brought on by or on behalf of the above minor, and which are or participation by the above minor.  Phone:  Date: |
|                    |   | Staff Initials:  |

