

INSTRUCTIONS FOR SUMMER SPLASH FORMS:

Please complete the following:

PARTICIPANT INFORMATION FORM (SPECIAL EVENTS FORM)

- To be completed for/by the individual with a disability.

DS/USA Waiver

- Please complete ONE FORM PER PERSON PARTICIPATING IN EVENT. Forms cannot be combined to cover multiple people. Persons who are their own legal guardian may print, sign and date in boxed area on form. Guardians must complete bottom portion of form. **LEGAL GUARDIANS ONLY** (such as a parent if under 18 or court appointed if over 18).

Water Ski Release Form

- Please complete ONE FORM FOR EACH PERSON PARTICIPATING IN WATER SKIING PORTION OF EVENT. If not water skiing, please do not complete this form.

Family Information Form

- Please complete one form for entire family (**ONLY IF FAMILY IS ATTENDING EVENT**). Each of those listed on this form **MUST** still have an individually signed DS/USA Waiver and a Water Ski Release Form (if they plan on water skiing).

Please send completed forms by email (scan completed forms) to brandon@challengealaska.org

OR

Send completed forms via fax to (907) 344-7349 (no later than noon Thursday June 27).

OR

Bring with on day of event.

Questions? Call Challenge Alaska at (907) 344-7254.

All information on these forms will be kept confidential.



PARTICIPANT INFORMATION FORM (SPECIAL EVENTS FORM)

Date Completed: _____

Name: _____ **Birthdate:** ____/____/____

Address: _____ **City/Zip:** _____

E-Mail: _____ **Phone:** _____ **Cell:** _____

Disability & Onset Date: _____

Description of Disability (characteristics/special needs/bowel& bladder/behaviors)

Do You Require a PCA? No Yes Name: _____ **Phone:** _____

Emergency Medical Conditions (seizures, bee allergy, diabetes, etc.):

EMERGENCY CONTACT

Name: _____ **Relationship to Participant:** _____

Home Phone _____ **Work Phone** _____ **Cell Phone** _____

Do you have a legal guardian? No Yes Type of guardianship: _____

Signature: _____ **Date:** _____

Guardian: _____ **Date:** _____

Disabled Sports USA Waiver & Release of Liability, and Media Release Agreement

Disabled Sports USA, and its affiliated Chapters ("Released Parties") are non-commercial, not for profit activity providers. The purpose of this agreement is to exempt, waive and relieve Released Parties from any and all liability for wrongful death, personal injury, and property damage, including, but not limited to, liability arising from the negligence of Released Parties. "Released Parties" include Disabled Sports USA, Challenge Alaska, and their representatives, administrators, directors, agents, coaches, employees, and volunteers; other participants, sponsoring agencies, sponsors, and advertisers; and, if applicable, the owners, operators, and lessors of premises on which the activities or events take place.

In consideration of the undersigned Participant being allowed to participate in any way in Disabled Sports USA and/or Challenge Alaska related events and activities, the Undersigned ("Undersigned" means only the Participant when the Participant is age 18 or older or it means both the Participant and the Participant's parent or legal guardian when the Participant is under the age of 18) agrees and acknowledges as follows:

1. Risks of Activity. Participant will be taking part in activities that can be hazardous and involve the risk of physical injury and/or death. The activities are inherently dangerous and Undersigned fully realizes the dangers of participating in the activities. The dangers and risks of the activities include, but are not limited to the condition of the premises and equipment, and the acts, omissions, representations, carelessness, and negligence of the Released Parties. Recognizing the risks and dangers, the Undersigned voluntarily chooses for Participant to participate in the activities and expressly assumes all risks and dangers of the participation in the activity, whether or not described above, known or unknown, inherent, or otherwise.

2. Release and Indemnification. Undersigned (a) unconditionally releases, forever discharges, and agrees not to sue the Released Parties for any claims or causes of action for any liability or loss of any nature, including personal injury, death, and property damage, arising out of or relating to Participant's participation in the activities, including, but not limited to claims of negligence, breach of warranty, and/or breach of contract the Undersigned may or will have against the Released Parties; and (b) agrees to indemnify, defend, and hold harmless the Released Parties from and against any liability or damage of any kind and from any suits, claims or demands, including legal fees and

expenses whether or not in litigation, arising out of, or related to, Participant's participation in the activities.

3. Helmet Use. Undersigned agrees that Participant shall use a helmet when participating in the following activities: Alpine skiing, cycling, equestrian, ice hockey, outdoor rock climbing, snowboarding, white water kayaking, white water river rafting, and any other activity when directed by Released Parties. Undersigned understands that a helmet is in no way a guarantee of safety and that no helmet can protect the wearer against all foreseeable impacts to the head, and that the activities can expose the Participant to forces that exceed the limits of protection provided by a helmet. Undersigned agrees to assume full responsibility for complying with this paragraph and that Released Parties shall not be liable for any injury or damages resulting from Participant's failure to use a helmet.

4. Miscellaneous. Undersigned agrees (a) Participant will not engage in any activities prohibited by any applicable laws, statutes, regulations and ordinances; (b) this agreement shall be governed by the laws of the State of AK and the exclusive jurisdiction and venue for any claim shall be located in the state courts located in Municipality of Anchorage County, AK; and (c) this agreement shall be binding upon the subrogors, distributors, heirs, next of kin, executors, and personal representatives of the Undersigned.

I HAVE CAREFULLY READ THIS AGREEMENT AND UNDERSTAND ITS CONTENTS. I AM AWARE THAT I AM RELEASING LEGAL RIGHTS THAT OTHERWISE MAY EXIST.

| | | |
|--------------------------------|--|-------------|
| | | |
| Participant's Signature | Participant's Name (please print clearly) | Date |

FOR PARTICIPANTS UNDER THE AGE OF 18

Date of Birth

Undersigned parent or legal guardian acknowledges that he/she is not only signing this Agreement on his/her behalf, but that he/she is also signing on behalf of the minor and that the minor shall be bound by all the terms of this agreement. Additionally, by signing this agreement as the parent or legal guardian of a minor, the parent or legal guardian understands that he/she is also waiving rights on behalf of the minor that the minor otherwise may have. The Undersigned parent or legal guardian agrees that, but for the foregoing, the minor would not be permitted to participate in the activities. If signing as the parent or guardian of a minor Participant, signing adults represent that they are a legal parent or guardian of the minor Participant.

| | | | |
|--|-----------------------------------|---------------------|------------------------|
| | | | |
| Parent/Legal Guardian Signature | Parent/Legal Guardian Name | Relationship | Emergency Phone |
| | | | |
| Parent/Legal Guardian Signature | Parent/Legal Guardian Name | Relationship | Date |

MEDIA RELEASE FORM

MEDIA/PHOTO WAIVER: Undersigned authorizes and gives full consent to Released Parties to copyright and/or publish for public view any and all photographs, digital recordings, videotapes and/or film in which Participant appears. Undersigned agrees that Released Parties may transfer, use, or cause to be used, these digital recordings, photographs, videotapes, or films for any exhibitions, public displays, publications, commercials, art and advertising purposes, television programs, and internet without limitations or reservations.

| | | |
|--------------------------------|--|-------------|
| | | |
| Participant's Signature | Participant's Name (please print clearly) | Date |

| | | |
|--|-----------------------------------|---------------------|
| | | |
| Parent/Legal Guardian Signature | Parent/Legal Guardian Name | Relationship |
| | | |
| Parent/Legal Guardian Signature | Parent/Legal Guardian Name | Relationship |

Challenge Alaska Summer Splash

Water Skiing Release Form

If you plan to water ski, please complete this form. If not, disregard.

While water skiing, Skiers will be towed behind or along-side a motor boat at speeds up to 25mph. Should you fall, your body must be able to sustain the impact of hitting the water at these speeds. If you think this impact may cause you pain or injury, please consult your doctor before attempted to water ski. **Initial** _____

Circle answers

Will falling sideways onto your shoulders cause pain or injury to your back or shoulders, or cause dizziness?
Yes No

Within the past six months, have you had any injury to or surgery on your back, spinal cord, hips or knees? Yes No

Do you wear a back brace? If YES, describe type of brace: _____
Yes No

Do you have Harrington Rods? If "yes" length of you've had them: _____
Yes No

Using arm strength, can you push your wheelchair independently? Yes No NA

Emergency Contact Name: _____ Telephone #: _____

Physician's Name: _____ Telephone #: _____

In signing below, I verify that the information above is current and accurate. I understand that the information above is confidential and will be used only by Challenge Alaska Inc., DSUSA to provide the student with a safe and fun skiing experience.

Printed Name & Signature of person filling out the form.

Date



SUMMER SPLASH FAMILY INFORMATION FORM

Complete only if family are attending – see instruction sheet

Date Completed: _____

Client: _____

Names: _____

Address: _____

City/Zip: _____

E-Mail: _____

Phone: _____

EMERGENCY CONTACT

Name: _____ Relationship: _____

Home Phone _____ Work Phone _____ Cell Phone _____

Signature: _____

Date: _____