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 (if attending event). Each of those listed on this form MUST still have a 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 23).

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 Da	te:			
Description of Disabilit	y (characteristics/special needs/	powel& bladder/behaviors)		
Do You Require a PC	A? No Yes Name:	Phone:		
Ç	onditions (seizures, bee allerg			
	EMERGENO	SY CONTACT		
Name:	Relati	Relationship to Participant:		
Home Phone	Work Phone	Cell Phone		
Do you have a legal gu	uardian? No Yes Type of guard	lianship:		
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

Parent/Legal Guardian Signature

- 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 Munincipality 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.

Relationship

Date

I HAVE CAREFULLY READ THIS AGREEME	NT AND UNDERSTAND ITS RIGHTS THAT OTHERWIS		/I AWARE THAT I AM REL	EASING LEGAL	
Participant's Signature	Participant's Name (please print clearly)			Date	
FOR PAR	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 a 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 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 the minor otherwise may have. The Undersigned parent or legal guardian agrees that, but for the foregoing, the minor would not be permit 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 guardian of the minor Participant.					
Parent/Legal Guardian Signature Pare	nt/Legal Guardian Name	Relationship	Emergency Phone	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 Name

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 body must be able to sustain the impact of hitting the water or injury, please consult your doctor before attempted to wa	at these speeds. If you think this impact may cause you pain
Circle answers Will falling sideways onto your shoulders cause pain or injury Yes	•
Within the past six months, have you had any injury to or sur spinal cord, hips or knees?	gery on your back, 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 t Yes No	hem:
Using arm strength, can you push your wheelchair independe	ently? Yes No NA
Emergency Contact Name:	Telephone #:
Physician's Name:	Telephone #:
In signing below, I verify that the information above is curre is confidential and will be used only by Challenge Alaska Incexperience.	
Printed Name & Signature of person filling out the form.	Date



SUMMER SPLASH FAMILY INFORMATION FORM

Date Completed:		Client:	
Names:			
Address:		City/Zip:	
E-Mail:	Phone:		
		EMERGENCY CONTACT	
Name:		Relationship:	
Home Phone	Work Phone _	Cell Phone	
Signature:		Date:	