

UNIVERSITY OF COLORADO

Informed Consent, Permission, Release, and Assumption of Risk

Participant Name _____ ("Participant")
Address _____
Phone Number: _____

Camp Activity Super Saturday for Gifted Children Date(s) 10/3/09 to 11/7/09

1. Participant wishes to participate in the above-referenced camp activity ("Activity"). Participant understands that risks and dangers in the Activity include but are not limited to falls, falling objects and broken or improperly used equipment, which could result in damage to or loss of property, drowning, illness or disease, physical or mental injury or death of participant or other persons. Injuries that may result from participation in this activity may include, but are not limited to, cuts, bruises, or sprained joints, broken bones, psychological trauma, infection, and death. Participant freely participates in the Activity. Participant understands and assumes all associated risks of personal injury or loss, bodily injury (including death), damage to, loss, or destruction of any personal property occurring in connection with or arising out of participation in the Activity.

2. Participant states to the best of his or her knowledge that Participant is free from any known health condition that could hinder or prevent active participation in or otherwise jeopardize the well-being of others in the Activity. By his/her signature below, Participant affirms that Participant is in good health and that participation in the camp will in no way aggravate such health condition. Participant will seek medical advice as appropriate.

In the event of an emergency, Participant grants the University of Colorado permission to authorize emergency medical treatment for [himself/herself] for the duration of [his/her] participation in this Activity:

Health/Medical Insurance Company _____ Policy # _____

Emergency Contact: Name _____ Phone _____

Participant understands that University of Colorado does not carry or provide health or accident insurance that responds to injury or illness as a result of his/her participation in this Activity.

3. Participant agrees to, and understands the importance of, following rules and regulations as set forth by camp leaders to minimize risk to Participant and others. Participant will not bring or possess any items, such as knives, weapons, and illegal drugs, which might endanger Participant or others. Possessing the above may result in removal from the Activity.

4 Participants in University of Colorado events are sometimes photographed and videotaped for use in promotional and education materials. Participant understands that such audio, video, film and/or print images may be edited, duplicated, distributed, reproduced, broadcast, and/or reformatted any form and manner without payment of fees. Participant authorizes the University of Colorado to record and photograph Participant's image child for use by the University of Colorado or its assignees in research, educational and promotional programs.

5. Participant hereby releases and discharges, indemnifies and holds harmless The Regents of the University of Colorado, a body corporate, and its member officers, agents, employees and any other persons or entities acting on their behalf, and the successors and assigns for any and all of the aforementioned persons and entities, against all claims, demands, costs and expenses, and causes of action whatsoever, either in law or equity, arising out of or in any way connected with any loss and/or bodily injury and/or disability, arising from Participant's participation in the Activity.

Having had sufficient time to review and seek explanation of the provisions contained above, Participant voluntarily gives consent and agrees to this Informed Consent, Permission, Release and Assumption of Risk:

Participant's name: _____

Participant's signature: _____ Date: _____

If Participant is under 18 years of age:

Parent(s) or

Legal Guardian(s) Name: _____

Signature: _____ Date: _____