

IOWA STATE UNIVERSITY

Recreation Services

MINOR PARTICIPATION – PARENTAL PERMISSION AGREEMENT

MINOR PARTICIPANT INFORMATION

Full Name: _____ Age: _____

This Parental Permission Agreement must be read carefully and signed by the parent/legal guardian of each minor participant who wishes to participate in Recreation Services.

THIS IS A LEGAL CONTRACT AND AFFECTS ANY RIGHTS YOU MAY HAVE IF YOU OR YOUR CHILD ARE INJURED OR OTHERWISE SUFFER DAMAGES WHILE PARTICIPATING WITH RECREATION SERVICES.

Inherent Risks and Dangers of Recreational Activities: _____ **(Parent/Guardian Initials)**

I understand and appreciate that risk is inherent when participating in recreational activities. Use of Recreation Services facilities and programs involves active physical participation in team sports, swimming, climbing and other physical fitness activities. While participating in these activities, the body is subject to a variety of influences that may become potentially hazardous. Some of these hazards include, but are not limited to: cuts, abrasions, contusions, dizziness, muscle cramps, heart attack, stroke, drowning, and a variety of other injuries, up to and including death. I affirm to the best of my knowledge, that my child is in good physical and mental health and free from cardiovascular, respiratory or other diseases or ailments, which could endanger him/her while using Recreation Services facilities and programs.

Behavior Expectations of the Participants: _____ **(Parent/Guardian Initials)**

- ◆ Successful participation in recreational activities requires participants to abide by general rules and regulations as well as rules specific to the particular activity (swimming, climbing, basketball, racquetball, use of weight and cardio equipment, etc.). It is important to follow the policies and procedures as it relates to minor participation. **Appropriate minor use guidelines will be presented at time of entry into Recreation Services facilities.**
- ◆ Participants are expected to exhibit appropriate behavior at all times. Inappropriate behavior will be discussed with the child when it occurs. Negative behavior affects more than just the participant involved in the misconduct; it can affect all those around them. If a participant is destructive to University property, the parent will be contacted for appropriate payment and/or removal from the Recreation Services facilities and/or programs.
- ◆ Recreation Services may remove any participant due to violence, bullying, or other destructive behavior. User fees will not be refunded.

RELEASE AND WAIVER OF LIABILITY

I, _____ **(Parent/Guardian of Participant)** understand and agree that there is a risk of serious injury to my child while utilizing Recreation Services facilities, equipment, and programs and recognize every activity; including but not limited to rock climbing, group fitness classes, use of weight and cardio equipment, swimming, and pick-up basketball, has a certain degree of risk, some more than others. By allowing my child to participate, I knowingly and voluntarily assume any and all risk of injuries, regardless of severity, which from time to time may occur as a result of my child's participation in athletic and other activities through ISU Recreation Services.

I hereby certify that my child has adequate health insurance to cover any injury or damages that he/she may suffer while participating, or alternatively, agree to bear all costs associated with any such injury or damages that may result from my child's participation.

I further certify that my child is in good health and has no mental or physical condition or symptoms that could interfere with their safety or the safety of others while participating in any activity using any equipment or facilities of ISU Recreation Services. I understand and agree that I alone am responsible to determine whether my child is physically and mentally fit to participate, perform, or utilize the activities, programs, equipment or facilities available at Iowa State University, and that I am not relying on any advice from ISU Recreation Services in this regard. To the extent I have any questions or need any information about my child's physical or mental condition or limitations, I agree to seek professional advice from a qualified physician.

Further, I hereby RELEASE AND HOLD HARMLESS, the State of Iowa, the Board of Regents-State of Iowa, Iowa State University and all of their respective officers, employees, student workers, student interns, volunteers, agents, representatives, institutions, and/or departments from any and all liability, claims, damages, costs, expenses, personal injuries, illnesses, death or loss of personal property resulting, in whole or in part, from my child's participation in, or use of, any facility, equipment, and/or programs of Iowa State University.

By signing this Release and Waiver of Liability, I state that I have read and understand the conditions set forth in this Parental Permission Agreement, my child and I agree to all conditions set forth herein, and I sign this voluntarily.

This Parental Permission Agreement and Release and Waiver of Liability shall be governed by and construed under the laws of the State of Iowa, which shall be the forum for any lawsuits arising from or incident to this Agreement.

Date

Parent/Guardian Name (please print)

Parent/Guardian Signature