Hello and welcome to Sonoma State University. Congratulations on being a part of this exciting adventure! **Wilderness Welcome Program** will be a perfect way for you to transition into college life at SSU and create new friendships before school begins.

Thank you for downloading the registration packet for the **Wilderness Welcome Program**. It includes more information about your trip as well as several forms that you will need to fill out and return to us as soon as possible. This packet may seem overwhelming but we feel it is better to be over-prepared. We have Campus Recreation and program specific waivers. Also included are a campus map, itinerary, emergency contact information and an equipment checklist. Please read them through thoroughly – we wouldn’t want you to miss any of the fun!

<table>
<thead>
<tr>
<th>Paperwork to return to us no later than July 31, 2014:</th>
<th>Items for you to keep:</th>
</tr>
</thead>
<tbody>
<tr>
<td>● Student Questionnaire</td>
<td>● Logistics and emergency numbers</td>
</tr>
<tr>
<td>● Outdoor Pursuits Waiver</td>
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<td>● Medical Questionnaire</td>
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<td>● Scholarship Application (optional)</td>
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</tbody>
</table>

Thanks again for registering for the 2014 Wilderness Welcome Program! If you have any questions regarding your confirmation packet or the trip in general, please do not hesitate to call or email us at:

Rebekah Israel or McKella Koho – WWP Programmers  
(707) 664 3478 wildernesswelcome@sonoma.edu.

Kevin Soleil – Adventure Program Coordinator  
(707) 664-2771 soleil@sonoma.edu

Email documents to Rebekah Israel or McKella Koho at the address above or send hard copies via mail to:

SSU Campus Rec  
Attn: Wilderness Welcome Program  
1801 East Cotati Ave.  
Rohnert Park, CA 94928

Take care and we look forward to seeing you soon,  
Wilderness Welcome Programs Staff
Wilderness Welcome Program - Logistics Emergency Numbers
Sonoma State University ~ Campus Recreation ~ Adventure Programs ~ Wilderness Welcome Program

Basic Itinerary for ALL Wilderness Welcome Trips:
This itinerary includes a basic outline of every WWP trip. There are many more exciting meals, workshops, and activities that we have in store for you. WWP leaders are dedicated to keeping you comfortable and we all look forward to our adventure. For more descriptions on specific trips refer to our website: http://sonoma.edu/campusrec/programs/welcome/

Sunday August 10th
4-6 PM Check-in and welcome, equipment shake-down
- **Tahoe Trek n’ Climb check-in at 4pm**
- **Pt. Reyes Paradise check-in at 4:30 pm**
- **Bay Area Backpackin’ check-in at 5pm**

6:30PM Dinner
7PM Ropes Course / Climbing Wall, ice-breakers, fun and games. Sleep at SSU Rec Center.

Monday August 11th – Friday August 15th
Breakfast and final preparations
Leave for designated trip: hike, climb, kayak, service project, live it up, etc…

Friday August 15th
Finish up trips and head back to SSU
Gear cleanup and showers
Welcome back cookout!
Spend the night at SSU Rec Center

Saturday August 16th
8AM Breakfast
9AM Closing
9:30AM Equipment Return, Disperse and begin move-in (trip leaders will be available to help all freshmen move into dorms)!

Emergency Numbers

In case of an extreme emergency (i.e. death in the family) here are a few pertinent numbers. Please note that it may not be possible to contact expeditions immediately (phones are generally off to save battery, groups operate under no news is good news and may not check in daily.) All groups will have emergency communication device to call out with should an incident occur in the backcountry. You should have the following information ready when calling: your name, call back number, and description of the emergency. Please start at the top of the list and work your way down.

Kevin Soleil - Adventure Programs Coordinator
Work: (707) 664-2771
Cell: (865) 304-8560

Rebekah Israel – WWP Programmer
Cell: (503) 575-5239

McKella Koho - WWP Programmer
Cell: (415) 299-4404

Mike Dominguez – Campus Rec Lead Coordinator
Work: (707) 664-3391

Campus Rec Front Desk
Desk: (707) 664-4386
Here is some helpful information when planning to travel with WWP. Please remember that the program check in starts at 5pm on August 10th, so make your travel plans accordingly. If you are planning to fly, please fly in to the San Francisco International Airport or the Oakland Airport. Airport Express will shuttle you from the airport to Rohnert Park. If you are unable to get from the shuttle drop-off to the SSU campus, please let us know so we can help you out.


Parking Permits:

If you will be bringing a vehicle during the week of the program you will need to purchase parking permits. Permits cost $5.00 a day, even on weekends. The total cost of parking during the wilderness welcome trips will be $35.00. You will need to purchase this upon arrival, or purchase a semester pass.

SSU Campus Map (SSU Rec Center circled in red):
Sign me up for the Wilderness Welcome Program 2014!

Which course would you like to Register for? (Check one)

All sessions are from August 10th-16th 2014

_____ **Bay Area Backpackin’**- Get a taste of everything that the Bay Area has to offer on this cross between urban and wilderness exploration! Learn how to utilize public transit systems and safely navigate your way to San Francisco for the outdoor adventure of a lifetime. Start your adventure off at China Camp State Park, then spend the rest of the week navigating from Angel Island, to Kirby Cove, to Mt. Tamalpais. Enjoy beautiful views as you make your way through the Bay Area and taste the culture of the San Francisco as you explore Embarcadero and walk over the Golden Gate Bridge on a trip that you won’t forget.

_____ **Tahoe Trek and Climb**- For those seeking a bit more of a backcountry adventure, join us for a day of rock climbing and some backpacking through the majestic Tahoe wilderness! Sleep under a blanket of stars while hiking mountains, swimming in lakes and relaxing by the northern California trees! Clear your mind in the midst of breathtaking scenery while you prepare for your first year of college.

_____ **Pt. Reyes Paradise**- Get a mix of adventure by practicing your kayaking and backpacking skills! Start your trip backpacking through Point Reyes National Seashore and end it with a wet n’ wild adventure. Experience the amazing bioluminescence on a kayaking journey to your last campsite in Tomales Bay! Test your limits, explore and enjoy some relaxation on the beach for this beautiful hybrid where backpacking meets the sea!

*For more details on specific trips please refer to the WWP web page: [http://www.sonoma.edu/campusrec/programs/welcome/index.html](http://www.sonoma.edu/campusrec/programs/welcome/index.html)*
PAYMENT

Please send or pay the full amount per trip in the form of a check, money order, or credit card # at the time of registration. Please make all checks payable to: Sonoma State University

*If applying for scholarship please submit the scholarship application with this registration form. *Payment to be determined after review of scholarship application.

______ Bay Area Backpackin'-
   Early Registration Before 7/16/13 - $330
   Regular- $410

______ Tahoe Trek and Climb-
   Early Registration Before 7/16/13 - $360
   Regular- $450

______ Pt. Reyes Paradise-
   Early Registration Before 7/16/13 - $380
   Regular- $450

CREDIT CARD
Card holder’s name: ________________________________
Credit Card # (most major cards accepted): ________________________________
Exp. Date: __________________
*If registering by credit card, you can also call (707) 664-3478 with credit card info.

CHECK
Please make all checks payable to Sonoma State University. Please put WWP and chosen trip name in memo of the check.

If registering by mail, please send registration and payment to:
Sonoma State Recreation Center
ATTN: Wilderness Welcome Program
1801 E. Cotati Ave.
Rohnert Park, Ca 94928

REGISTRATION LOGISTICS
Registration is on a first-come first-served basis. Upon receiving your payment, we will send a detailed information packet including all necessary paperwork. If the trips fill (and they do fill fast) we will place your name on the waiting list.

CANCELLATION POLICY
You will receive a full refund if notice of cancellation is given 30 days prior to the course starting date. A 50% refund will be given if notice of cancellation is given 14 to 29 days prior to course starting date. No refund is possible with fewer that 14 days notice (even if due to last minute illness).
Wilderness Welcome Program 2014- Scholarships
Sonoma State University ~ Campus Recreation ~ Adventure Programs ~ Wilderness Welcome Program

Name________________________________________ Date__________

Campus Rec recognizes that not everyone can afford to go on Wilderness Welcome Program trips. We also recognize that these trips can be highly beneficial for individuals who really want to take part in them but may not have the funds. In order to make these trips more accessible, Campus Rec has set aside limited funds to provide full and partial scholarships to interested students who cannot afford this opportunity otherwise. Applications will be dealt with on a first come first serve basis until the scholarship fund is depleted.

Accompanying your registration form, please submit this sheet with a one page typed statement that demonstrates financial need, desire to be involved with WWP, how you think this program will benefit you and any other information you feel is relevant. Please take others needs into account and give a fair estimate of the amount that you would be able to contribute if any. Thanks!

_____ Bay Area Backpackin’- $410

Scholarship Request ______

Participant Fee__________

_____ Tahoe Trek and Climb- $450

Scholarship Request ______

Participant Fee__________

_____ Pt. Reyes Paradise- $450

Scholarship Request ______

Participant Fee__________
Wilderness Welcome Program Student Questionnaire
Sonoma State University ~ Campus Recreation ~ Adventure Programs ~ Wilderness Welcome Program

Name (that you want on your name tag):___________________________________________

Potential Major:_________________________________________________________ Sex:__________

Describe your current athletic and swimming ability level:
____________________________________________________________________________________

Do you have any special dietary needs? (all meals are provided by the Welcome Programs and are vegetarian
due to health, environmental, and financial reasons)
____________________________________________________________________________________
____________________________________________________________________________________

Do you have any experience in the outdoors (i.e. hiking, camping, backpacking, etc.)? Please describe, if any.
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Why do you wish to participate in Wilderness Welcome Program?
____________________________________________________________________________________
____________________________________________________________________________________

What goals do you have for your WWP course?
____________________________________________________________________________________
____________________________________________________________________________________

What are you looking forward to the most about your trip?
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Please list any hobbies or interests that you have:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

T-Shirt Size (Circle One):    XS       S       M       L       XL       XXL       ______

Psych-meter: On a scale of 1 (not stoked) to 10 (MEGA STOKED!!), how excited are you for this?

1    2    3    4    5    6    7    8    9    10    11
If you know your address and phone number for the Fall 2014 semester, please fill out the information below so we can stay in touch more easily when school begins!

Name:_______________________
Phone:___________________________
Email (Seawolf email):______________________________
Address (Building Name and Room #):

**Please send us a recent picture so we can recognize you when you get here!

**Arrival and Storage:

Please let us know a little bit about how you plan to arrive so we can best accommodate you.

I will be arriving at SSU on _____________, between ______am/pm and ______am/pm

☐ I do have items I would like in storage while on our adventure
☐ I do NOT have items that I would need storage for.

**Rental Needs:

I want to rent the following items from the Outdoor resource Center for my WWP trip:

_____Backpack
_____Sleeping Bag
_____Sleeping Pad (thermarest)
_____Headlamp*
_____Bowl and Utensils*
_____Rain Jacket*

*Remember, these items are limited so if you can buy or borrow your own gear, that is highly recommended! (check the items you will need and we will get the paperwork together for you)

**Equipment rental is included in the price of your registration.
Outdoor Pursuits Participant Equipment List

ODP will provide all group gear. This includes tents, stoves, cook sets, water filters, maps, first aid kit and group communication device.

Some personal gear can be rented in the Outdoor Resource Center (*) on the first floor of the Recreation Center. (707) 664-DIRT (3478). WWP Registration Fee includes the cost of any personal gear WWP participants need to rent.

Gear
- Sleeping bag* & pad*
- Backpack*
- Footwear
  - One pair for the trail (boots)
  - A lightweight camp shoe (sneaker/sandal)
    - To protect the environment from too much impact around camp
- Flashlight or headlamp* with spare batteries
- Toiletries
  - Toothbrush/paste (either bring a small supply or have only one or two people in your group carry a tube)
  - Biodegradable soap (try to share)
  - Bandana (for washing or wiping)
- Eating Utensils*: (if you are trying to pack light try only bringing a spoon or a fork and not both)
  - Something to eat with*
  - Something to eat out of*
  - Something to enjoy a hot drink from*
- Sunglasses & Sunscreen
- Hat for shade or warmth
- Pocket knife
- Personal medication in a labeled waterproof container
- Water bottles* (2)

Clothing
In general, bring clothes that can be layered for changing conditions. Also, stick to fabrics like poly pro, capeline, fleece, wool, silk and try to stay away from cotton. When cotton gets wet it does not hold in body heat, as other materials will.

First layer
- Long underwear
- Liner socks (this is a personal preference)

Mid Thermal Layer
- Shorts
- T-shirt
- Pants
- Sweater
- Gloves
- Hat
- Socks

Outer Shell Layer
- Water/windproof jacket* and pants*

Other
- Camera
- Snacks
- Journal
- Games and Fun Stuff
- Travel/Souvenir Money
Outdoor Pursuits Outing Waiver Form

Notice: This waiver is a contract with legal consequences.
Please use a pen and read it carefully before signing.

In consideration of my acceptance of my participation on the outing to (Location) ______________________ on dates __________________, I hereby freely agree to and make the following contractual representations and agreements.

I FULLY REALIZE THE DANGERS OF PARTICIPATION IN AN OUTING OF THIS TYPE AND VOLUNTARILY ASSUME ALL OF THE RISKS ASSOCIATED WITH SUCH PARTICIPATION.

I understand the risks include, by way of example and not limitation, the following: Accidents that may happen while driving in vehicles to outing locations including car pools, bicycles and walking; the dangers of falling from high places; the dangers of being lost in a wilderness area; the possibility of being exposed to extreme temperatures for long periods of time and with limited food, water and comforts; sudden changes in weather; all dangers associated with water sports; failed rescue or evacuation attempts; property damage or loss; and the possibility of serious physical injury, pain, mental trauma or death with medical attention several hours or several days away.

ADDITIONAL HAZARDS FOR THE ABOVE NAMED TRIP MAY INCLUDE, BUT ARE NOT LIMITED TO: ______

INITIAL_____

I agree that it is my sole responsibility to be familiar with the physical and/or mental demands associated with the above named outing. With these demands in mind, I have no physical or medical condition, which, to my knowledge, would endanger others or myself if I participate in this event, or would interfere with my ability to participate in this event. The condition of my equipment must be in working order. I agree to abide by any University or Outdoor Pursuits program rules and regulations INCLUDING NO ILLEGAL DRUGS OR ALCOHOL WHILE ON THIS OUTING.
INITIAL_____

I understand and agree that situations may arise during the outing, which may be beyond the control and scope of knowledge of the outing guides or participants. I RELEASE, FOREVER DISCHARGE AND AGREE NOT TO SUE AND INDEMNIFY the trustees of California State University System, the State of California, Sonoma Student University and their officers, agents, and employees including program directors, staff and outing guides and any employees of the California State University System or other outing participants. I HEREBY WAIVE ALL SUCH CLAIMS WHICH I HAVE NOW OR MAY HEREAFTER HAVE AGAINST THE ABOVE ORGANIZATIONS OR PERSONS, HOWEVER CAUSED.
INITIAL_____

I understand that while this trip is coordinated through the Outdoor Pursuits program, transportation may not be provided with Outdoor Pursuits, in which case carpooling is the responsibility of the participants. As a driver, I certify that I am licensed, hold liability insurance in accordance with state law, and am responsible for any and all incidents/accidents involving my vehicle during the trip.
INITIAL_____

I grant permission for Campus Recreation to take visual/audio images of myself. I agree that Campus Recreation owns the images and all the rights related to them. The images may be used in any manner or media without notifying me, such as university-sponsored websites, publications, promotions, advertisements and posters. I waive any right to inspect or approve the finished images or any printed or electronic matter that may be used with them, or to be compensated for them.
INITIAL_____

I HAVE CAREFULLY READ THIS FORM AND FULLY UNDERSTAND ITS CONTENTS. I UNDERSTAND OUTDOOR PURSUITS RESERVES THE RIGHT TO DISMISS ME FROM THE TRIP DUE TO FAULTY EQUIPMENT, INAPPROPRIATE BEHAVIOR, OR ANY OTHER REASON THAT MAY JEPORDIZE THE SAFETY OF THE TRIP. I AM AWARE THIS IS A RELEASE OF LIABILITY, A WAIVER OF CLAIMS, AN AGREEMENT NOT TO SUE AND A CONTRACT BETWEEN MYSELF AND SONOMA STATE UNIVERSITY, AND FOR THE BENEFIT OF OTHERS DESCRIBED HEREIN, I SIGN OF MY OWN FREE WILL.

Participant’s Signature: ___________________________ Date: ____________
Name (printed): ___________________________ Phone #: ____________
Parent or Guardian if participant is under 18 years of age:
Signature: ___________________________ Date: ____________
Name (printed): ___________________________ Phone #: ____________
OutDoor Pursuits
Medical Questionnaire
www.sonoma.edu/campusrec

Name and Dates of the Program you are signing up for:

Name: ___________________________ Date of birth: _____________
Day phone: ___________ Eve phone: ___________
Address: ________________________

Who should we contact in an emergency?
What is their day phone: ___________ Eve phone: ___________

Physician’s name: ___________________________ Physician’s phone: ___________

Your health insurance company: ___________________________ Policy #: ___________

Please describe your current level of physical condition:

Please describe your swimming ability:

Are you currently taking any prescription medications? If yes, please list medication and dosage.

Are you allergic to any foods, insect bites, or medication? If yes, please explain what you are allergic to, the reaction and treatment required.

Medical history: Do you now have, or have you had within the past two years, any of the following conditions: If you answer “yes” to any of the questions below please explain in the space provided.

<table>
<thead>
<tr>
<th>Condition</th>
<th>yes</th>
<th>no</th>
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<tbody>
<tr>
<td>Altitude Illness</td>
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<tr>
<td>Diagnosed Mental Illness</td>
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<td>Broken Bones</td>
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<td>Severe Anxiety or depression</td>
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<td>Severe sprains</td>
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<td>High blood pressure</td>
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<td>Shoulder problem</td>
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<td>Heart disease</td>
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<td>Back or neck problem</td>
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<tr>
<td>Seizure disorder</td>
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<tr>
<td>Foot or ankle problem</td>
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<td>Asthma</td>
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<td>Leg or knee problem</td>
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<td>Diabetes</td>
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<td>Arm/hand problem</td>
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<td>Chronic headaches</td>
<td></td>
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<tr>
<td>Intestinal problem</td>
<td></td>
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<tr>
<td>Shortness of breath</td>
<td></td>
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<tr>
<td>Urinary tract problem</td>
<td></td>
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<tr>
<td>Chest pain</td>
<td></td>
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<tr>
<td>Heat or cold intolerance</td>
<td></td>
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<tr>
<td>Hospitalization in past year</td>
<td></td>
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<tr>
<td>Uncorrected vision</td>
<td></td>
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<tr>
<td>Hearing impairment</td>
<td></td>
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<tr>
<td>Pregnant</td>
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<tr>
<td>Other</td>
<td></td>
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</tbody>
</table>

Please elaborate on any “yes” response from above:

Do you have any other condition that could affect your performance during physical activity?

The information I have provided is true and accurate to the best of my knowledge.

Participant Signature: ___________________________ Date: ___________
Parent Signature (if under 18): ___________________________ Date: ___________
Campus Recreation at Sonoma State University

RELEASE OF LIABILITY - PROMISE NOT TO SUE
ASSUMPTION OF RISK - AGREEMENT TO PAY CLAIMS
PERMISSION TO USE VISUAL LIKENESS

Activities: a) USE OF SSU RECREATION CENTER FACILITIES, EQUIPMENT, PROGRAMS, CLASSES, EVENTS AND SERVICES. b) USE OF SSU POOL FOR CAMPUS RECREATION PROGRAMS.

Effective Locations and Time Periods: a) RECREATION CENTER: DURING HOURS OF OPERATION FROM THIS DATE (below) THROUGH AND INCLUDING August 31, 2014. b) SSU POOL: DURING CAMPUS REC SWIM HOURS OF OPERATION FROM THIS DATE (below) THROUGH AND INCLUDING August 31, 2014 AS WELL AS DURING ANY OTHER TIMES DURING THIS PERIOD IN WHICH CAMPUS RECREATION SPONSORS PROGRAMS/ACTIVITIES IN THE POOL.

In consideration for being allowed to enter and use the Recreation Center and equipment, and participate in its activities, including use of the SSU Pool, on behalf of myself and my next of kin, heirs and representatives, I release from all liability and promise not to sue the State of California, the Trustees of the California State University, California State University, Sonoma State University, and its employees, officers, directors, volunteers and agents (collectively “University”) and the Sonoma Student Union Corporation and its employees, officers, directors, volunteers and agents (collectively “Auxiliary Organization”) from any and all claims, including claims of the University’s or Auxiliary Organization’s negligence resulting in any physical or psychological injury (including paralysis and death), illness, property damage or economic or emotional loss I may suffer because of my presence and/or participation.

I am voluntarily entering and using the Recreation Center and SSU Pool. I am aware of the associated risks which include but are not limited to physical or psychological injury, pain, suffering, illness, disfigurement, temporary or permanent disability (including paralysis), economic or emotional loss, death and/or property damage. I understand that these injuries or outcomes may arise from my own or other’s actions, inaction, negligence, conditions related to the condition of the Recreation Center and SSU Pool. Nonetheless, I assume all related risks, both known or unknown to me, of my presence and participation.

I agree to hold the University and Auxiliary Organization harmless from any and all claims, including attorney’s fees and/or damage to my personal property that may occur as a result of my presence and/or participation in Recreation Center and SSU Pool facilities, equipment, programs, classes, events, and services. If I need medical treatment, I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance.

I grant permission for Campus Recreation staff to take, and make public, visual/audio images of me. I agree that Campus Recreation owns the images and all the rights to them. Without notifying me the images may be used in any manner or media including, but not limited to, University-sponsored web sites, publications, promotions, advertisements, and posters. I waive any right to inspect, approve, or be compensated for the use of such images.

As of the date below, I am 18 years or older. I understand the legal consequences of signing this document, including that I (a) release the University and the Auxiliary Organization from all liability, (b) promise not to sue the University and the Auxiliary Organization, and (c) assume all risks associated with my presence and participation in the Recreation Center and SSU Pool.

I understand that this document is written to be as broad and inclusive as legally permitted by the State of California. I agree that if any portion is held invalid or unenforceable, I will continue to be bound by the remaining terms.

I have read this document, and I sign it freely. No other representations concerning the legal effect of this document have been made to me.

Participant Signature: ____________________________________________

(Note: If under 18 years of age as of the date below, a Parent or Guardian Signature is required on Page 2.)

Participant Name (Print): __________________________ Date: __________________________

Page 1 of 2. Page 2 required only if participant is under 18 years of age.
If Participant is under 18 years of age as of the date on Page 1, a Parent or Guardian Signature is required:

I am the parent or legal guardian of the person named on the reverse side. I understand the legal consequences of signing this document, including that I (a) release the University and the Auxiliary Organization from all liability on my and the Participant’s behalf, (b) promise not to sue on my and the Participant’s behalf, (c) assume all risks of the Participant’s presence and participation. I allow my dependent to be present and to participate. I understand that I am responsible for the obligations and acts of the Participant as described in this document. I agree to be bound by the terms of this document.

I have read this two-page document, and I am signing it freely. No other representations concerning the legal effect of this document have been made to me.

____________________________________  Date: ______________________
Signature of Minor Participant’s Parent/Guardian

____________________________________
Name of Minor Participant’s Parent/Guardian (Print)

____________________________________
Minor Participant’s Name (Print)

____________________________________
Date Minor Participant will turn 18 years old

____________________________________
Minor Participant’s SSU ID# (if applicable)
Campus Recreation Ropes Course  
Sonoma State University

Name: ___________________________________________________________________________ Date of Birth: _____________

Address: ________________________________________________________________________

City/State/Zip: _____________________________________________________________________

Emergency Contact: _____________________________________________________________ Phone #: ___________________________

Release of Liability/Agreement Not to Sue for Ropes Course Activities:

I, __________________________________, am aware that Ropes Course elements and activities include certain risks including but not limited to the risk of injury or death. I am voluntarily participating in this activity and/or instruction about this activity with knowledge of the dangers involved, and hereby agree to accept full responsibility for the risks and dangers involved.

In consideration of being allowed to use the Ropes Course facilities and participate in programs with Sonoma State University’s Campus Recreation Ropes Course.

1) I agree that I will not sue, or otherwise make any claim against Sonoma State University, Sonoma Student Union, or their Employees, agents (whether paid or volunteer), and contractors, for any loss, injuries, or damages resulting from participation in Ropes Course elements and activities at Sonoma State University’s Campus Recreation Ropes Course.

2) I agree Sonoma State University’s Campus Recreation Ropes Course, its employees, agents, and contractors, will not be legally responsible for any loss, injury or damage of any kind to me, my heirs, or assigns, resulting from any cause, including negligence.

3) I agree to use the Ropes Course facilities according to the rules and regulations of Sonoma State University’s Campus Recreation Ropes Course.

4) I agree that as to any equipment, which I use from Sonoma State University’s Campus Recreation Ropes Course during any climbing/element or other activity, I use at my own risk. I understand and agree that Sonoma State University’s Campus Recreation Ropes Course shall not be liable for any loss, damage, or injury resulting from the use of said equipment. Sonoma State University’s Campus Recreation Ropes Course makes no warranties regarding said equipment.

5) To the fullest extent allowed by law I agree to Release, Indemnify and Hold Harmless Sonoma State University’s Campus Recreation Ropes Course, its employees, agents, and contractors from all actions or claims which could be brought by myself, my heirs, assigns or personal Representative(s) for any loss, injury or damage sustained during and resulting from participation in any activity at Sonoma State University’s Campus Recreation Ropes Course including any loss, injury or damage resulting from use of any equipment.

6) The terms of this release shall also be binding as to any other persons, including Family Members, heirs, executors or administrators, and including any minors who may accompany me. I understand that this is a binding contract which supersedes any other agreements or representations, and is not intended to provide a comprehensive and complete release of liability, but is not intended to assert defenses which are prohibited by law.

7) I am legally competent to sign this release; or, my parent or guardian has read and signed this release.

I have carefully read this agreement. I fully understand its contents and sign it of my own free will.

Participant Signature: __________________________ Date: ____________________________

Must also be signed by a parent or legal guardian if participant is a minor, under 18 years of age.

Parent/Guardian Signature: __________________________ Date: __________________________

If I am signing on behalf of a minor, in addition to the terms above, I also agree to Release, Hold Harmless and Indemnify Sonoma State University’s Campus Recreation Ropes Course, and its employees, agents, and contractors for an claim the minor could bring. I agree to be solely responsible for any medical or legal expenses incurred by the minor.

Accepted by Sonoma State University’s Campus Recreation Ropes Course Staff Signature: __________________________
Release Of Liability/Agreement Not to Sue for Climbing Wall Activities:

I, __________________, am aware that rock climbing/artificial wall climbing and bouldering include certain risks including but not limited to the risk of injury or death. I am voluntarily participating in this activity and/or instruction about this activity with knowledge of the dangers involved, and hereby agree to accept full responsibility for the risks and dangers involved.

In consideration of being allowed to use the climbing facilities and participate in programs with Sonoma State University’s Campus Recreation Climbing Wall.

1) I agree that I will not sue, or otherwise make any claim against Sonoma State University, Sonoma Student Union, or their EMPLOYEES, agents (whether paid or volunteer), and contractors, for any loss, injuries, or damages resulting from participation in rock climbing/artificial wall climbing and/or bouldering at Sonoma State University’s Campus Recreation Climbing Wall.

2) I agree Sonoma State University’s Campus Recreation Climbing Wall, its employees, agents, and contractors, will not be legally responsible for any loss, injury or damage of any kind to me, my heirs, or assigns, resulting from any cause, including negligence.

3) I agree to use the climbing facilities according to the rules and regulations of Sonoma State University’s Campus Recreation Climbing Wall.

4) I agree that as to any equipment, which I provide or borrow or rent from Sonoma State University’s Campus Recreation Climbing Wall during any climbing/or other indoor or outdoor activity, I use at my own risk. I understand and agree that Sonoma State University’s Campus Recreation Climbing Wall shall not be liable for any loss, damage, or injury resulting from the use of said equipment. Sonoma State University’s Campus Recreation Climbing Wall makes no warranties regarding said equipment.

5) To the fullest extent allowed by law I agree to RELEASE, INDEMNIFY and HOLD HARMLESS Sonoma State University’s Campus Recreation Climbing Wall, its employees, agents, and contracts from all actions or claims which could be brought by myself, my heirs, assigns or personal REPRESENTATIVE(s) for any loss, injury or damage sustained during and resulting from participation in rock climbing/artificial wall climbing and/or bouldering at Sonoma State University’s Campus Recreation Climbing Wall including any loss, injury or damage resulting from use of any equipment.

6) The terms of this release shall also be binding as to any other persons, including family MEMBERS, heirs, executors or administrators, and including any minors who may accompany me. I understand that this is a binding contract which supersedes any other agreements or representations, and is not intended to provide a comprehensive and complete release of liability, but is not intended to assert defenses which are prohibited by law.

7) I am legally competent to sign the release; or, my parent or guardian has read and signed this release.

I have carefully read this agreement. I fully understand its contents and sign it of my own free will.

Participant Signature: _______________________________ Date: __________________________

Must also be signed by a parent or legal guardian if Participant is a minor, under 18 years of age.

Parent/Guardian Signature: ___________________________ Date: __________________________

If I am signing on behalf of a minor, in addition to the terms above, I also agree to Release, Hold Harmless and Indemnify Sonoma State University’s Campus Recreation Climbing Wall, and its employees, agents, and contractors for an claim the minor could bring. I agree to be solely responsible for any medical or legal expenses incurred by the minor.

Accepted by Sonoma State University’s Campus Recreation Climbing Wall Staff Signature: ___________________
BLUE WATERS KAYAKING
PARTICIPANT AGREEMENT, RELEASE, AND ACKNOWLEDGMENT OF RISK

In consideration of the services of Blue Waters Kayaking, their agents, owners, officers, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as “BWK”), I hereby agree to release, indemnify and discharge BWK, on behalf of myself, my children, my parents, my heirs, assigns, personal representative and estate as follows:

1. I acknowledge that sea kayaking entails known and unanticipated risks that could result in physical or emotional injury, paralysis, death, or damage to myself, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.

   The risks include, among other things: boat capsize; tidal conditions and currents; travel in remote areas; collision with objects or other watercraft; prolonged exposure to cold water, hypothermia, accidental drowning; mental anguish or trauma, illness in remote areas; adverse weather conditions, exposure to sun, strong wind, cold storms, large waves, eddies and whirlpools, and lightning; aggressive and/or poisonous marine life; wrist, arm, shoulder, and/or back injuries; slips and falls while hiking; and rapidly changing weather and water conditions.

   Furthermore, BWK guides have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant’s fitness or abilities. They might misjudge the weather, the elements, or the terrain. They may give inadequate warnings or instructions, and the equipment being used might malfunction.

2. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.

3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless BWK from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of BWK’s equipment or facilities, including any such claims which allege negligent acts or omissions of BWK.

4. Should BWK or anyone acting on their behalf, be required to incur attorney’s fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.

5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I am willing to assume the risk of any medical or physical condition I may have.

6. In the event that I file a lawsuit against BWK, I agree to do so solely in the state of California, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

AUTHORIZATION: I hereby authorize any medical treatment deemed necessary in the event of any injury while participating in the activity. I either have appropriate insurance or, in its absence, agree to pay all costs of rescue and/or medical services as may be incurred on my/our behalf. I agree that any film or photographs of me/us, as participants, become the property of BWK and may be used for promotional or commercial purposes.

By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against BWK on the basis of any claim from which I have released them herein. I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.

Print Name __________________________________________ Signature of Participant

Address

Street City State Zip code

Phone ___________ Email ___________ Date ___________

PARENT’S OR GUARDIAN’S ADDITIONAL INDEMNIFICATION
(Must be completed for participants under the age of 18)

In consideration of __________________________ (print minor’s name) ("Minor") being permitted by B.W.K. to participate in its activities and to use its equipment and facilities, I further agree to indemnify and hold harmless B.W.K. from any and all Claims which are brought by, or on behalf of Minor, and which are in any way connected with such use or participation by Minor.

Parent or Guardian __________________________________ Print Name __________________________________ Date ____________

PO Box Inverness, CA phone: 415-669-2600 fax: 415-669-9698 info@bwkayak.com