

Activity Descriptions and Voluntary Disclosure

Team Building Activities

Challenge Course

Participants, under the supervision of trained facilitators, will be working in a group to complete various tasks in an outdoor and/or indoor setting. Individuals may be standing/sitting on platforms above the ground, walking on cables, climbing over walls, held off the ground by the group, or swing on a rope. Participation in all activities is based on the individuals and groups abilities.

Climbing Tower

Participants, under the supervision of trained facilitators, will be utilizing a 40ft. tower for rock climbing, high ropes, and zip lining activities. All participants will be required to wear safety gear provided by 4-H Memorial Camp and must demonstrate required skills as requested by the facilitators after receiving instruction. Participants will be required to participate in activities that help to ensure the safety of others in the program.

Titanic Team Challenge

Participants, under the supervision of a trained facilitator, will use cardboard and other supplies to build cardboard boats which will be raced in the shallow area of the camp swimming beach facilities. Individuals may be using a utility knife to cut cardboard. They may also be in water up to 3.5 ft. deep when racing their boat.

Health History – Voluntary Disclosure

The purpose of collecting this information is to ascertain your ability to participate safely in this activity.

1. Would you describe your current physical fitness and activity level as either:

LOW MEDIUM HIGH

2. Is there a medical condition you should disclose prior to engaging in this activity which may effect your participation, including but not limited to a heart condition; pre-existing injury to an ankle, knee, or back; any medications that could impact your health or safety; and/or any allergies you may have (food, insects, bees, medications, etc.)

No Yes Details: _____

Participant Name: _____

In case of Emergency notify:

Contact:(Name)_____ Relationship: _____ Phone Number: _____

Name of Group: **RYLA**

Date of Program: **April 17-19, 2020**

Program: **Challenge Course, Climbing Tower, Titanic Team Challenge**

Photo, Video, and Audio Release

I grant the University of Illinois Extension 4-H youth development program, the permission to record and/or disclose my (or my child's when noted below) identity, including, but not limited to photograph, image, likeness, and voice ("Identity") and to use, reproduce, and distribute video and/or sound recordings, films, photographs, transparencies or other recordings of me (or my child when noted below) arising out of

Program and/or Activity

Such use, reproduction, and distribution may be done in whole or in part in any media for any purpose on behalf of University of Illinois Extension, such as in Extension publications, webpages, social media or to otherwise promote Extension programs in posters, audio/video presentations or other displays. My (or my child's when noted below) identity may also be released to local news media to be used in connection with reporting on, promoting, or otherwise publicizing Extension programs.

In addition, I waive all claims to compensation or damages based on the use by the University of my (or my child's when noted below) identity. I also waive the right to inspect or approve the finished photograph, video or audio recording, or other recording.

I understand that this release is perpetual, that I may not revoke it, and that it is binding on me, my heirs and assigns.

I warrant that I have the full right and authority to grant this release and that I am at least 18 years of age. I further attest that I have read this release form and full understand its contents.

Name of Subject

Parent or Guardian's Name (If subject is a minor)

Address

Address

City State Zip

City State Zip

Subject's Signature

Parent or Guardian Signature (If subject is a minor)

Date

Date

8/2012

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