



URBAN WILDERNESS PROJECT
P. O. Box 18874
Seattle, WA 98118
206-464-8364(phone)
206-760-1367(fax)
urbanwildernessproject@yahoo.com
www.urbanwildernessproject.org

GENERAL PARTICIPATION WAIVER

WHAT: Urban Wilderness Project (UWP) activities, including but not exclusively limited to the UWP programs known as, Griot Works™, Adventure Works™, Restoration Works™, Wilderness Works™, BOUNCE™, Haiku Hikes™ and program field trips. Trips may include, urban activities, frontcountry activities and backcountry or wilderness trips, as related to the program, such as hiking, biking, indoor rock climbing or games. Participants may read and tell stories at cafes, emergency housing for families, hospitals or other locations. Participants may use tools for removing weeds, planting and building trails in local parks (urban/frontcountry) or on public lands (frontcountry/backcountry) and/or carry heavy items. Participants may work inside or outside and be exposed to changing weather conditions. All participants are required to dress appropriately for the activities they will be engaging in on various days.

WHEN/WHERE: (Write in the day and date for the event you are participating in today)

Griot Works™ and **Bounce™** locations vary including community centers, transitional housing,

Restoration Works™ meets Saturdays in Genesee Park at the picnic shelter between Genesee and St and Lake Washington Blvd or a Benefit St. Park for work in the East Duwamish Greenbelt..

Adventure Works™ and **Haiku Hikes™** Locations vary.

Wilderness Works™ is an extended overnight summer program. Locations vary.

ASSUMPTION OF RISK AND RELEASE:

We release and agree to hold harmless the Urban Wilderness Project and its owner, Jourdan I Keith, and/or UWP's partners, affiliates, contractors, employees, volunteers, officers and directors from all claims for injury, death, property damage and expenses, including attorney's fees arising from participation in the Urban Wilderness Project. This release and agreement is made in exchange for participation in Urban Wilderness Project programs and the use of UWP's facilities and transportation and the facilities, equipment, and transportation of its affiliates, partners or volunteers.

Complete Application for Summer Programs 2009

PARTICIPATION:

I hereby give permission for my child to participate in the Urban Wilderness Project program/activities. I also give permission for my child to travel in vehicles operated by Urban Wilderness Project staff and volunteers, Seattle METRO Transit system and/or private transportation companies if needed. I hereby waive the Urban Wilderness Project and its staff and volunteers of any liability regarding injuries and/or accident due to my child's participation in its programs.

MEDICAL & DENTAL TREATMENT:

I hereby give permission that my child may be given emergency treatment including First Aid, CPR and Wilderness First Aid (backcountry only) by a qualified staff member of the Urban Wilderness Project staff or the qualified staff of its affiliates or partners. I also give permission for my child to be transported by ambulance, treated by aid car personnel, and/or transported to an emergency center for treatment. In the event that I cannot be contacted, I further authorize and consent to the medical, dental, surgical and hospital care treatment and procedures to be performed for my child by a licensed physician or hospital when deemed immediately necessary by the physician to safeguard my child's health. I waive my right of informed consent to such treatment. I certify (or declare) that I am the parent or legal guardian of the child named below and that I have the authority to authorize such activities and actions. I certify that the information is true and correct.

PUBLICITY:

I hereby give permission for my child to be recorded or photographed while participating in Urban Wilderness Project activities with the understanding that those photos, recordings and images will be used for promotional and outreach purposes, such as informational slide shows, power point presentations, DVD's, recordings, or any other media, and the creation/update of the Urban Wilderness Project website.

ADULT

Name: (PRINT) _____

Address: _____

Phone: _____

Signature _____ Date _____

Emergency Contact Name and Number (Print): _____

Relationship: _____

Participant's Age: _____

YOUTH PARTICIPANTS

Name (Print): _____

Signature: _____ Date _____

Middle or High School _____

Yr. of H.S. Graduation _____

Guardian/Parent (if under 18)

Emergency Contact Name and Number (print): _____

Relationship: _____ Date _____



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ACCIDENT WAIVER AND RELEASE OF LIABILITY

I acknowledge that Adventure Works™ and Wilderness Works™ programs are athletic events and each trip not limited to hiking, backpacking, boating, bike riding or camping program is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury and property loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of athletes, equipment, vehicular traffic, actions of other people including, but not limited to, participants, volunteers, spectators, coaches, trip leaders, event officials, and event monitors, and/or producers of the event, and lack of hydration. These risks are not only inherent to athletics, but are also present for volunteers. I hereby assume all of the risks of participating &/or volunteering in this event. I realize that liability may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained or controlled by them or because of their possible liability without fault.

I certify that I am physically fit, have sufficiently trained for participation in the event and have not been advised otherwise by a qualified medical person.

I acknowledge that this Accident Waiver and Release of Liability form will be used by the event holders, sponsors and organizers of the event in which I may participate, and that it will govern my actions and responsibilities at said events.

In consideration of my application and permitting me to participate in Urban Wilderness Project events, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) Waive, Release and Discharge from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter occur to me including my traveling to and from this event, THE FOLLOWING ENTITIES OR PERSONS:

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Urban Wilderness Project and its owner, or staff including Jourdan I Keith, and its volunteers, including but not limited to, Felicia Gonzalez, Fran Lo, , Su Theida, Amber Campbell, Heather Francis their directors, officers, employees, volunteers, representatives, and agents, the event holders, event sponsors, event volunteers; (B) Indemnify and Hold Harmless the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this event, whether caused by the negligence of releases or otherwise.

I hereby consent to receive medical treatment that may be deemed advisable in the event of injury, accident and/or illness during this event.

I understand that at this event or related activities, I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and assigns.

The Accident Waiver and Release of Liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I hereby certify that I have read this document; and, I understand its content.

	Date
Print Participant's Name Age Signature (If under 18 years old, Parent or guardian must also sign)	

PARENT / GUARDIAN WAIVER FOR MINORS (Under 18 years old)

The undersigned parent and natural guardian does hereby represent that he/she is, in fact, acting in such capacity and agrees to save and hold harmless and indemnify each and all of the parties referred to above from all liability, loss, cost, claim or damage whatsoever which may be imposed upon said parties because of any defect in or lack of such capacity to so act and release said parties on behalf of the minor and the parents or legal guardian.

Print Participant's Name	Age	Signature of Parent or Guardian	Date
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