## City of Aspen Parks, and Recreation Department



participate in the activities listed above.

# COVENANT NOT TO SUE, RELEASE, AND ASSUMPTION OF RISK PLEASE READ CAREFULLY BEFORE SIGNING. THIS IS A LEGALLY BINDING AGREEMENT!

	THIS IS IT LEGITLET BITCHING MOREEVIERT.				
Household Last Name _	First Name				
Birth Date	Minors will be listed on next page.				
Address:	City:STZip:				
Home Phone#:	Work#: E-mail Address				
Aspen Ice Garden, Asp	Red Brick, Red Brick Center for the Arts, Aspen Recreation Center, Lewis Ice Arena, pen Tennis Facilities, and Aspen Golf Course Facilities to include the climbing tower, ool, athletic fields, tennis courts, golf course, ice rinks, bumper cars and Zamboni				
obtaining any remedy	ment, you give up your right to bring a course of action to recover compensation or for any injury to yourself or your property or for your death, however caused, arising on in the above listed activities or use of City facilities, now or any time in the future.				
activities listed above, l knowledge of the nature	Acknowledgement of Risk and agree that the activities listed above and the City facilities used to participate in the have inherent risks, including the risk of serious injury, paralysis and death. I have full and extent of all risks of serious injury, paralysis and death. I have full knowledge of the				
nature and extent of all those activities.	risks associated with the activities listed above and the use of associated City facilities for				
those activities.	Release/Indemnification				
In consideration of my participation in the activities listed above and the use of City owned facilities, I, andersigned user and participant, agree to release and on behalf of myself, my heirs, representatives, executed administrators and assigns HEREBY DO RELEASE, the City of Aspen, its officers, agents, sponsors employees from any cause of action, claims, or demands of any nature whatsoever, including, but not limited claim of negligence, which I, my heirs, representatives, executors, administrators and assigns may now have have in the future on account of personal injury, property damage, death or accident of any kind, arising out of any way related to my participation in the activities listed above or the use of City owned facilities, whether participation or use is supervised or unsupervised, however the injury or damage caused, including, but not limited the negligence of the City of Aspen, its officers, agents and employees.					
hold harmless the City	participation and use of City owned facilities, I, the undersigned, agree to indemnify and of Aspen, its officers, agents and employees from any and all causes of action, claims, s of any nature whatever arising out of or in any way related to my participation or use of				
	ment shall be in full force and effect on the date hereof, the date(s) upon which I participate bove, and on any other occasion when I may participate or use City owned facilities to				

Signature of Participant: \_\_\_\_\_ Date: \_\_\_\_\_

and activities for use in publications, advertisements, or on City of Aspen websites.

I hereby consent to the use by the City of Aspen of any photographs taken of me during city run events, programs,

If the Participant listed above is under 18 years of age, a separate "Parental Acknowledgement and Consent" form must be executed and attached hereto.

## PARENTAL ACKNOWLEDGMENT AND CONSENT

This form must be executed and attached to a duly executed "Covenant Not to Sue, Release, and Assumption of Risk" form if the participant is under 18 years of age.

The undersigned, represents that I am the legally appointed or natural guardian of the participant listed on the attached "Covenant Not to Sue, Release, and Assumption of Risk" form who is under the age of 18 years; that he or she has signed this document with my full knowledge and consent; and that I join in the execution of the same and agree to the terms thereof and do hereby bind myself, my heirs, executors, personal representatives and assigns.

Name of Parent or Guardian executing this document (Ple	ease print)
Signature of Parent/Guardian:	Date:
Hospital and Medical Release: The undersigned parent or legal guardian of the minor part of emergency medical care or treatment of my son or day of the Aspen Valley Hospital, or any other hospital, or a required in case of accident or medical emergency incurrence control of the Aspen Valley Hospital, or any other hospital, or a required in case of accident or medical emergency incurrence control of the Medical Release:	ughter by any professional medical nursing staf- ny licensed physician, which in their judgment is
Signature of Parent/Guardian:	Date:
Name of minor	Birth Date:
Name of minor	Birth Date:
Name of minor	Birth Date:
Name of minor	Birth Date:
Name of minor	Birth Date:
In case of emergency, contact with me can be made by ca	
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#### ROCK CLIMBING ACTIVITIES

Name of Participant			-
Date	<del></del>		

#### **ACKNOWLEDGMENT OF RISKS**

The sport of rock climbing and the use of the facilities of the City of Aspen climbing wall (hereinafter, the "Wall") and other training facilities, has inherent risks, including the risk of serious injury, paralysis and death. I have full knowledge of the nature and extent of all risks associated with rock climbing and the use of the wall, including, but not limited to:

- 1. All manner of injury from falling off the climbing wall and hitting rock faces and projections, whether permanently or temporarily in place, or the floor;
- 2. Rope abrasion, entanglement and other injuries resulting from activities on or near the climbing wall such as, but not limited to, climbing, belaying, repelling, lowering the rope, rescue systems, and any other rope techniques;
- 3. Injuries resulting from falling climbers or dropped items, such as, but not limited to, ropes or climbing hardware;
- 4. Cuts or abrasions resulting from skin contact with the climbing wall;
- 5. Failure of ropes, slings, harnesses, helmets, climbing hardware, anchor points, or any part of the climbing wall structure.

I further acknowledge that the above list is not inclusive of all possible risks associated with the use of the wall and that the above list in no way limits the extent or reach of the release.

Initial	