



O U T D O O R U W

Outdoor UW Private/Group Programs Waiver

First Name: _____ Middle Initial: _____ Last Name: _____

Phone Number: (_____) _____ Email: _____

Emergency Contact Name: _____ and phone: (_____) _____

While every subtlety of acceptable behavior cannot be practically detailed, all Outdoor UW participants are expected to stringently adhere to the following standards:

1. Outdoor UW is committed to providing a safe, friendly, and inclusive environment for all members. Participants are expected to act in a considerate, respectful, and responsible manner at all times while participating in Outdoor UW programs. Any verbal or physical conduct that demeans or threatens others is absolutely unacceptable.
2. Outdoor UW adheres to all policies and procedures of the Wisconsin Union and the University of Wisconsin – Madison in handling complaints of harassment and/or discrimination. Any inappropriate or unwanted comments, misconduct, touching, or bullying should be reported immediately to Outdoor UW staff.
3. Outdoor UW maintains that consumption of alcohol by anyone under the age of 21 during an Outdoor UW activity is illegal and is thus strictly prohibited. Responsible consumption of alcoholic beverages by members who are 21 and over is expected. Alcohol is not allowed in University vehicles at any time.
4. Outdoor UW forbids participation in any illegal activity (under Wisconsin or federal law) on any Outdoor UW-sponsored activity—regardless of location.
5. Outdoor UW strictly prohibits consumption of alcohol and illegal drugs prior to or during participation in any inherently dangerous Outdoor UW activity, including but not exclusive to: land yoga, SUP yoga, and group paddling.
6. Outdoor UW holds members personally and financially responsible for charges incurred as a result of improper behavior, including but not exclusive to: being arrested, being ticketed, damaging or losing property, having to find alternative transportation/lodging due to misconduct, etc.
7. Outdoor UW requires that all participants follow staff expectations related to programs. Varying expectations do exist depending on the type of program activity.
8. Outdoor UW requires that all activities follow prudent and reasonable safety/risk management practices which are in line with industry and University specific guidelines, including but not exclusive to manufacturer recommendations and national governing bodies.

Any individual violating the above standards will be required to meet with staff leadership and supervisors to determine disciplinary outcomes from the incident/activity in question. Outcomes may include suspension or expulsion from Outdoor UW programs without refund. Outdoor UW staff and Instructors retain the authority to immediately dismiss any participant in violation of this agreement or any University policies from a trip, program, or lesson at the participant’s expense. **I understand and agree to the above standards.**

Full Name: _____ Signature: _____ Date: _____

Parent/Guardian Name: _____ Parent/Guardian Signature: _____ Date: _____

Assumption of Risk, Indemnification, Release and Consent for Emergency Treatment 

I, _____, desire to participate voluntarily in recreational activities of Outdoor UW at the University of Wisconsin-Madison.

I UNDERSTAND THAT I AM BEING ASKED TO READ EACH OF THE FOLLOWING PARAGRAPHS CAREFULLY. I UNDERSTAND THAT IF I WISH TO DISCUSS ANY OF THE TERMS CONTAINED IN THIS AGREEMENT, I MAY CONTACT THE **RISK MANAGEMENT**, AT TELEPHONE NUMBER (608) 262-8926 OR (608) 262-8925.

Assumption of Risks:

I understand that physical activity related to **OUTDOOR UW** by its very nature carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. Some of these involve strenuous exertions of strength using various muscle groups, some involve quick movement involving speed and change of direction, and others involve sustained physical activity, which places stress on the cardio vascular system. The specific risks vary from one activity to another, including yoga, paddling, and hiking/camping, but in each activity the risks range from: 1) minor injuries such as scratches, burns, bruises and sprains, to 2) major injuries such as fractures, internal injuries, joint or back injuries, heart attacks, and concussions, to 3) catastrophic injuries including paralysis and death. I understand that the University has advised me to seek the advice of my physician before participating in this activity. I understand that I have been advised to have health and accident insurance in effect and that no such coverage is provided for me by the University or the State of Wisconsin. **I KNOW, UNDERSTAND AND APPRECIATE THE RISKS THAT ARE INHERENT IN THE ABOVE-LISTED PROGRAMS AND ACTIVITIES. I HEREBY ASSERT THAT MY PARTICIPATION IS VOLUNTARY AND THAT I KNOWINGLY ASSUME ALL SUCH RISKS.**

Signature: _____ *Date:* _____

Parent/Guardian Signature if under the age of 18: _____ *Date:* _____

Hold Harmless, Indemnity and Release:

In consideration of permission for me to voluntarily participate in **Outdoor UW programs and activities**, today and on all future dates, I, for myself, my heirs, personal representatives or assigns, agree to defend, hold harmless, indemnify and release, the Board of Regents of the University of Wisconsin System, the University of Wisconsin-Madison, Outdoor UW, The University of Wisconsin Foundation, and their officers, employees, agents, and volunteers, from and against any and all claims, demands, actions, our causes of action of any sort on account of damage to personal property, or personal injury, or death which may result from my participation in the above-listed program. This release includes claims based on the negligence of the Board of Regents of the University of Wisconsin System, the University of Wisconsin-Madison, Outdoor UW, and their officers, employees, agents, and volunteers, but expressly does not include claims based on their intentional misconduct or gross negligence. **I UNDERSTAND THAT BY AGREEING TO THIS CLAUSE I AM RELEASING CLAIMS AND GIVING UP SUBSTANTIAL RIGHTS, INCLUDING MY RIGHT TO SUE.**

Signature: _____ *Date:* _____

Parent/Guardian Signature if under the age of 18: _____ *Date:* _____

Consent for Emergency Treatment:

I authorize the University of Wisconsin-Madison and its designated representatives to consent, on my behalf, to any emergency medical/hospital care or treatment to be rendered upon the advice of any licensed physician. **I AGREE TO BE RESPONSIBLE FOR ALL NECESSARY CHARGES INCURRED BY ANY HOSPITALIZATION OR TREATMENT RENDERED PURSUANT TO THIS AUTHORIZATION.**

Signature: _____ *Date:* _____

Parent/Guardian Signature if under the age of 18: _____ *Date:* _____

This form is valid for Outdoor UW program participants. Please submit to event leader or OUW staff before participation.



Rental Agreement

O U T D O O R U W

I assume full responsibility for equipment rented from the University of Wisconsin-Madison's Outdoor UW program. I have checked the equipment and found it to be in good and usable condition. I agree to pay for damages to equipment and accessories in excess of normal use as assessed by Outdoor UW staff, up to the full replacement cost of the damaged or lost item. I assume total liability for all loss or theft of property.

All equipment rentals will be charged as follows:

1. Paddle Crafts: Rental charges assessed by the hour. Rentals returned more than 10 minutes after subsequent hour begins will be charged for an additional hour
2. Off-Site Rentals: Rates by the day or weekend. Off-site rentals returned after assigned due date and time will be billed another full day rate.

If equipment is lost, I will inform Outdoor UW immediately and agree to be billed for the hours late as of the day of notification and full replacement cost of the item(s). I understand that failure to meet my financial responsibilities to Outdoor UW may render me ineligible for future rentals, and may result in suspension of my Union membership.

I understand that I have read and agree to the safety rules and regulations and am agreeing to the above terms and conditions for the remainder of the 2019 rental season, and I will be held responsible for upholding all terms and conditions on this and each future visits this season.

Renter Student ID/Union ID # (If Applicable) Date

Renter Signature Renter Name (Please Print)

Parent/Guardian Signature Parent/Guardian Name (If Under 18)

Renter Address

Renter Phone Number Renter Email Address

