ALPINE CAMP AND CONFERENCE CENTER

Higher Ground Challenge Course & Impact Airsoft Course Release Form

	ck the activities in which you enge Course (High Ropes, Zipline, Climb	•		
This permission and release form thigher Ground Challenge Course	must be signed, with no additions, delet and/or Airsoft activities. This is to help ou carefully think through your willing	ensure you understand the risk		
Contact Information (please p	rint):			
		Date of Birth: _	·	
Address:	ess: City:		Zip:	
Home Phone: ()	Business/	Mobile: ()		
E-Mail Address:				
Please describe any health problem	n or disability that may affect your abili	ty to participate:		
	se industry equipment standards, my y equipment standards, my weight do			
Medical and Emergency Conta	act Information:			
$Emergency\ Contact/Relationship:$		Phone: (Phone: ()	
List allergies, if any:				
List current medications:				
Health Insurance Carrier:		Policy #:		
demanding activities in an outdoor sett level or at low, medium or high distant	rse and Impact Airsoft Course at Alpine Cing. They include climbing, jumping and ot aces from the ground. You will be working lowing carefully, understand it, and sign a programs.	her rigorous activities on natural ar with trained instructors and with o	nd man-made structures either ground thers in your group. Physical injurie	
RELEA	ASE OF LIABILITY DECLARATION	and PERMISSION STATEM	<i>TENT</i>	
rigorous physical, mental and emotio voluntarily elect to participate in the from participation. On my behalf, or of I hereby forever release and dischar	er Ground Challenge Course and Impact A nal activities. 2) There are risks of physic e program, or to have my child participate in hehalf of my minor child, and/or on behalf rge Alpine Inc.'s Higher Ground Challenge all liability for any injury or harm to me or	al injury. 3) The activities include n the program, and assume the risl of my personal representatives and Course and/or Impact Airsoft Cou	e emotional and mental stresses. ss of injury or harm that could result theirs; rse, it's owners, officers, employees	
seek appropriate medical assistance	Camp and Conference Center, Inc. and is e for my child or me if necessary. I also for my child for use in promotional man	give permission to Alpine Car		
By signing below, I indice	ate I have read, understand and volun	tarily sign this release of liabili	ity and permission form.	
Participant Signature (all participa	unts must sign)	Date		
Parent/Guardian Signature (if part	icipant is younger than 18)	Date		
Name of group with which you/yo	ur child is attending/participating:			
	nation on upcoming events at Alpine?	YesYes	No Thank You	