

**Lake Superior State University**  
**Rock Climbing Wall**  
**Assumption of Risk and Waiver of Liability**  
**Adult (18 years of age and above)**

By signing this agreement you agree that you have read the entire form and that you give up your right to bring court action or recover compensation or obtain any other remedy for any injury to yourself or your property or for your death however caused arising out of your use of Lake Superior State University, Norris Center Climbing Wall now or any time in the future.

**Assumption of Risks**

I acknowledge and accept that rock climbing involves risks, dangers, and hazards. The inherent risks, hazards and dangers include but are not limited to: sprains, strains, dislocations, amputations, cuts, bruises, breaks, teeth (loosened/broken/knocked out), head injuries, concussion, paralysis, and/or death. I understand, accept, and assume those hazards and risks, and waive all claims against Lake Superior State University, its Board of Trustees, officers, agents, representatives and employees, further known as LSSU and any other business or person connected with the rock climbing wall, of all claims for injuries or damages or otherwise, which may arise for any reason whatsoever as a result of participation in the Lake Superior State University's Rock Climbing Wall.

**By initialing your acknowledge that you have read, understand and are aware of the risks, dangers, and hazards associated with rock climbing and freely accept and fully assume all such risks, dangers, and hazards and the possibility of the personal injury, death, property damage or loss resulting from participating at Lake Superior State University's Rock Climbing Wall.**

Initials: \_\_\_\_\_ Date: \_\_\_\_\_

**Release of Liability, Waiver of Claims, Assumption of Risk and Indemnity Agreement by Parent/Legal Guardian**

In consideration of my participation at LSSU's Rock Climbing Wall, I hereby agree to the following:

1. To waive any and all claims that the participant now has or may in the future have against Laker Superior State University and to release LSSU from any and all liability for any loss, damage, expense or injury including death, that the participant my suffer or that hi/her next of kin may suffer as a result of participant's participation in activities at LSSU's Rock Climbing Wall, due to any cause whatsoever, including the negligence of the Releases, negligence of other rock climbers, and including failure on the part of the Releases to safeguard or protect me from the risks, dangers and hazards of rock climbing referred above.
2. To hold harmless and indemnify LSSU from any and all liability for any property damage of personal injury to any third party resulting from participants participation in rock climbing.
3. This agreement shall be effective and binding on the participant's hairs, next of kin, executors, administrators, assigns and representatives in the event of the participant's death of incapacity.

**I hereby certify that I am at least 18 years of age and am competent to contract in my own name. I acknowledge that I have read and understand this WAIVER and that by signing it I surrender valuable rights, which I have done freely and voluntarily.**

Name (printed): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

In case of serious injury, please notify: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_