## University of West Florida, Office of Recreation and Sports Services

# STATEMENT OF ASSUMPTION OF RISK, INFORMED CONSENT, and RELEASE OF LIABILITY

| Activity (completed by Recreation Staff)   | Canoe/Kayak Checkout   |
|--|--|
| 1  | (print full name), the undersigned   |
| guardian), have actual knowledge and conscious appearation wellness activities organized by the University of participating in may involve strenuous physical acceptosure to inclement weather and other dangers, severe, including serious permanent disability, party own actions, the actions or inactions of others of Other specific risks that may arise from monot limited to driving accidents (during kayak treatling branches, strenuous paddling injuries, lifting sickness, and slips & falls.  I understand that certain activities require a chat the participant is in good health and has no participating. I acknowledge that it is my responsible of such coverage is provided or implied by the University of the unive | der eighteen (18) years of age, the undersigned's parent of ppreciation of the particular dangers involved in sports and f West Florida. I acknowledge that the activities I will be ctivity, physical interaction with other participants, travel which may result in injuries to me, ranging from minor to tralysis, or death. These types of injuries may result from or a combination of both.  If y participation in these activities may also include, but are ransport), insect/animal bites, poisonous plants, allergies and injuries, hypothermia/hyperthermia, drowning, motion a minimum level of fitness for safe participation. I warran physical condition that would prevent the participant from bility to secure appropriate personal medical insurance and iversity of West Florida. |
| orotection and I hereby undertake to abide by the adhere to the rules and regulations involved with tother such activities presently and permanently.  In consideration of my participation, I agree of Florida, the Florida Board of Governors, the Ur  | involved with this activity are designed for my safety and ese rules and regulations. I understand that my failure to this activity may result in my being removed from this and et to hold harmless, release and forever discharge the State niversity of West Florida Board of Trustees, the University respective officials, employees, agents, assigns, volunteers   |
| ordinary negligence of those involved, including Released Parties from any claim or lawsuit by me, of my participation in the program offered or sponsor I expressly agree that this release and waive the laws of Florida and that if any portion is held to shall continue in full legal force and effect.  Finally, I hereby declare and represent the  | rer is intended to be as broad and inclusive as permitted by<br>to be invalid, it is agreed that the balance of the agreemen<br>that in making, executing and tendering this Statement of<br>ase of Liability, I have read this statement, understand its  |
| In witness whereof, I have executed this do  | ocument this day of, 20  |
| Signature of Participant   | Cell or Local Phone Number of Participant  |
| Name of Emergency Contact  | Telephone Number of Emergency Contact  |
| Signature of Witness   | Signature of Witness   |
|  |  |

Printed Name of Witness

Printed Name of Witness

#### **BOAT CHECKOUT RULES and REGULATIONS**

Fees will be charged to your University account if equipment is unreturned or returned damaged or excessively dirty. Repair and cleaning fees are decided on a case-by-case basis at the discretion of the Outdoor Adventure Coordinator. Major replacement fees are as follows: Kayak \$375, Canoe \$500, Kayak Paddle \$35, Canoe Paddle \$18, life jacket/seat cushion \$30, Lock & Key \$20.

#### Canoes

- The canoe rack is located behind Building 13 on the Northwest end of campus near the Nature Trail Boardwalk entrance
- Canoes are not to be transported to other waterways. They are strictly for launch at the University Bayou
- One personal flotation device is required for each passenger. All non-swimmers must wear a PFD at all times on and near the water. One non-swimmer is allowed per canoe.
- One canoe, two paddles, three cushions, and three PFDs can be checked out with your Nautilus card. Canoes have a three passenger maximum capacity.
- Take precaution to remain within your skill and experience level when deciding your route and timeline for paddling. Be knowledgeable of current and predicted environmental conditions, including water and air temperature, approaching storms, winds, and tides.
- All equipment must be returned by sunset of the same day they are checked out. A late fee of \$20 per day will be charged to your university account, up to the cost of replacement.

### **Kayaks**

- Only sit-on-top kayaks are available for general checkout. Closed kayaks require more specialized skills and therefore are restricted to participants of certain Outdoor Adventure clinics and trips
- A Personal Flotation Device (PFD) is required to be worn at all times
- Two kayaks, two paddles, and two PFDs may be checked out with each Nautilus card
- Take precaution to remain within your experience and skill level when planning your route and timeline for paddling. Be knowledgeable of current and predicted environmental conditions, including water and air temperature, approaching storms, winds, and tides
- All equipment is to be checked in by the end of the next business day following check out. Failure to do so will result in a \$20 late fee and up to the cost of replacement being charged to your university account
- An Outdoor Adventure staff person may be available for assistance, but it is ultimately the responsibility of the renter to properly secure kayaks to vehicles.

I have read, understand, and agree to follow the rules and regulations listed above. It is my responsibility to explain and enforce these rules and regulations to any and all users of the equipment I have checked out. I assume full responsibility for ALL equipment and will reimburse the University for equipment lost or damaged.

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|---------------------------|-------------------|-----------------------|---|------------------|--|--|
| We the underpersonal inju | •                 | la from all claims re | Signature all claims resulting from any loss or |                  |  |  |
| Name                      |                   |                       | Swimmer   | Swimmer          |  |  |
| Name                      |                   |                       | Swimmer   |                  |  |  |
| Name                      |                   |                       | Swimmer   | Non-swimmer      |  |  |
|                           |                   | For Office Use        |   |                  |  |  |
| Out Time                  | Staff             | Equipment: #Canoe _   | #Kayak/s  | _#Canoe Paddle/s |  |  |
| In Time                   | Staff             | #Life Jacket/s        | #Seat Cushion/s                                 | #Kayak Paddle/s  |  |  |