

Date Revised: 09/7/2025

ACKNOWLEDGEMENT OF HAZARD/ASSUMPTION OF RISK AND WAIVER OF LIABILITY FOR Sports and Recreation, and One Jump Ahead, MINISTRIES OF WOODMEN VALLEY CHAPEL

Participant's Name(s): \_\_\_\_\_

Email Address: \_\_\_\_\_

Activity: Jump Rope and Conditioning Activities

I \_\_\_\_\_ am aware that the One Jump Ahead/ Woodmen Valley Chapel activity(s) that I am participating in may include but is not limited to one or more of the following hazard(s) that may result in personal harm and or death.

- UNPREDICTABLE AND DANGEROUS ENVIRONMENTAL CONDITIONS AND OR HAZARDS including, but not limited to; snow, rain, very cold and very hot temperatures, lightning, altitude, loose rock, falling rock and or ice, avalanche, sun exposure, mud, snow and other slippery conditions. I understand the risks inherent in outdoor activities caused by the environment either natural or man made.
- POTENTIAL FAILURE OR MISUSE OF TECHNICAL EQUIPMENT/MACHINERY including but not limited to gas stoves and or lanterns, wire and beaded ropes, mats, and electrical devices. I understand the risks of equipment failure and or the dangers caused by misuse of equipment includes but is not limited to broken/damaged bones/joints/tendons/ligaments, impalement, burns, lacerations, electrical shock, loss of vision from explosive stoves and or lanterns, poisoning from ingestion of fuels.
- ACTIVITIES STRESSING THE CARDIO-RESPIATORY SYSTEM including, but not limited to; walking/running/hiking, jumping, tumbling, and other similar activities.

I AM RESPONSIBLE FOR MY OWN SAFETY

If I see or hear anything I feel is questionable and/or dangerous, it is my responsibility to ask or inform One Jump Ahead, or Woodmen Valley Chapel staff until corrected or satisfactorily answered. I understand the need to maintain a high level of self-orientation in regards to safety. Instructors and Coaches are not able to watch me at all times. Doing so may risk the safety of the instructor/coach and team, and or other participants. I have been informed and understand the risks involved. I am participating in this course and these activities by my own choice.

RELEASE: I hereby release and discharge One Jump Ahead, and Woodmen Valley Chapel and its instructors/volunteers, coaches and staff from any and all liabilities, suits, claims and demand actions or damages (including attorneys fees and disbursement) incurred by me and arising out of my participation or intended participation in activities and or services arranged for me by One Jump Ahead, and Woodmen Valley Chapel Sports and Recreation and its instructors/volunteers, coaches or staff, including, without limitation, all claims for property damage, personal injuries or wrongful death except to the extent that such loss or damages is caused by or results from gross negligence on the part of any party. This release is binding on my heirs, assigns, and agents.

- If any provision of the Agreement shall be determined, by Court having jurisdiction, to be invalid, or illegal or unenforceable, the remainder of this Agreement shall not be affected but shall continue in full force and effect as though such invalid, illegal or unenforceable provision was not originally a part of this Agreement. The heart, lung and blood vessel system to these activities cannot always be predicted with accuracy. I know there is a risk of certain abnormal changes occurring during or following activity which may include abnormalities of blood pressure or heart rate ineffective functioning of the heart and in rare instances, heart attack.
- ALTITUDE COMPLICATIONS including by not limited to; loss of breath, headaches, dizziness, nausea, mountain sickness, pulmonary edema, cerebral edema. I understand that One Jump Ahead, and Woodmen Valley Chapel activities are conducted at altitudes that can cause complication that may result in permanent injury and/or death.

This agreement shall be construed in accordance with and governed by the laws of the State of Colorado, irrespective of the fact that a party hereto may not be a resident of that State.

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Signature of parent if participant is under 18

\_\_\_\_\_  
Signature of Add'l family participant

\_\_\_\_\_  
Signature of Add'l family participant