



Riverfront Park Adventure Experience
Acknowledgement of Risk and Release
Parent/Guardian Form

Instructions: Please read this form carefully. Each participant's parent or legal guardian must sign this acknowledgement of risk form before participating in any of the outlined activities. Without all required signatures, the individual will not be permitted to participate in any of the outlined activities.

No Medical Insurance

I understand USF carries no medical insurance for the protection of participants in the Activities, and any insurance coverage existing for the protection of participants in the Activities, participants are encouraged to carry their own personal medical coverage. Any insurance coverage existing with respect to USF shall not alter the terms of this waiver nor impose any liability on USF.

Publicity Release

I hereby grant USF the right to use, for promotional purposes, any videos, photographs, and recordings taken by staff or participants of my dependent during participation of recreational activities at Riverfront Park and its challenge course.

Acknowledgement of Effect of Release

I understand and acknowledge that by signing this release I have agreed not to assert legal claims, which I might otherwise possibly assert against USF, based on my Dependent's participation in the Activities. I also understand and acknowledge that by signing this release I assume full responsibility and legal liability for the claims or other legal dBDC qnd recordings

