



CHESAPEAKE BAY OUTWARD BOUND SCHOOL

PARTICIPANT AGREEMENT (With Assumption of Risks, Promise not to Sue, and Release of Liability)

Participant Information

Participant Name: _____

Participant Date of Birth: _____

Course/Event Year: _____

This agreement is effective for all Outward Bound courses, events, and program activities starting in the year indicated above.

IMPORTANT: Please read this carefully. This document is a legally binding contract. Your signature below indicates that you have read and understand every part of this agreement and that you agree to be bound by all of its terms without limitation.

As consideration for allowing me to participate in the course, program, and activities (collectively “OB Activities”) of Outward Bound (“OB”), I agree, on my behalf and on behalf of my heirs and survivors, to the following:

My Suitability to Participate: I am aware of and familiar with the OB Activities in which I may participate. I have had ample opportunity to ask questions about the OB Activities and their risks. I have no mental or physical limitations that might affect my ability to participate in OB Activities that I have not disclosed to OB in writing. I understand and agree that I must obey all OB rules, regulations, and policies.

ACKNOWLEDGMENT AND ASSUMPTION OF RISK: My participation in OB Activities is purely voluntary. These activities may be physically, mentally, and emotionally challenging. I understand it is impossible to identify all OB Activities in which I may participate. I am aware that these activities may include among others: hiking, camping, including cooking over stoves, open fires, or other means, rock, wall, or tower climbing, ropes and/or challenge courses (traversing ropes suspended off the ground, potentially at great heights, swinging or traveling by a cable and pulleys and other such activities), physical problem-solving activities, water activities including sea kayaking and swimming, vehicle travel, and community and other service projects that may involve using power and hand tools. I understand that I may engage in other activities not described above.

OB Activities may be modified for any reason, including convenience, weather, or unexpected conditions or events. I may also be in areas with exposure to individuals who are not under OB’s supervision or control.

OB Activities may require that I travel by van, car, boat (motorized and non-motorized), and public or chartered transport on public or private roads and over remote and unpredictable terrain with steep roads and slippery slopes.

It is impossible to know or list every risk associated with every activity; however, I understand the risks I may encounter include but are not limited to: slipping, falling, being struck by or striking objects, persons, or the ground; rough seas, drowning; improper or malfunctioning equipment or structures; communicable disease, disease carrying or poisonous plants, insects, or animals; wild animals and marine life; physical contact with other participants; and risks caused or contributed to by any mental, physical, or emotional conditions any participant may have. Another risk is the potential misjudgment by OB instructors, volunteers, other staff members, co-participants or contractors related to my participation, including but not limited to decisions regarding my physical condition and capabilities, weather, water, terrain, route, or medical treatment. All these risks are inherent to the OB Activities, which means that they cannot be changed or eliminated without altering the essential elements of the activity.

I acknowledge that my participation in OB Activities involves inherent risks and other risks, hazards, and dangers that can cause or lead to death, injury, illness, property damage, mental or emotional trauma, or disability. I

understand that OB cannot ensure my safety and does not seek to eliminate all these risks, in part, because they facilitate the educational and other objectives of the OB Activities. I agree to assume all the risks of my participation in OB Activities, whether inherent or not and whether described above or not.

My Release of Liability and Promise not to Sue OB: On behalf of myself and my heirs and survivors, I hereby forever release, waive, and discharge Chesapeake Bay Outward Bound School, Outward Bound Services Group II, LLC, Outward Bound, Inc., other Outward Bound chartered Schools, and each of their respective agents, employees, officers, directors, trustees, independent contractors, volunteers, and all other persons or entities acting under their direction and control (collectively referred to as “the Released Parties”) from, and agree not to pursue a claim or sue the Released Parties for any liability, claim, or expense in any way associated with my enrollment or participation in any OB Activity including the use of any equipment or facilities. This release includes any losses caused or alleged to be caused, in whole or in part, by the negligence, whether active or passive, of the Released Parties to the fullest extent allowed by law (but not for gross negligence).

My Agreement to Indemnify OB: I further agree to defend, indemnify (to pay or reimburse for money any Released Party is required to pay, including attorney’s fees and costs), and hold harmless the Released Parties with respect to any and all claims related to my enrollment or participation in the OB Activities, including the use of equipment or facilities and including claims that OB instructors, staff, or volunteers were negligent. This includes claims for damage or injury that are finally determined to have been caused by my negligent conduct or intentional misconduct. This indemnity includes payment for attorney’s fees and costs incurred by the Released Parties in defending a claim or suit if the claim or suit is withdrawn or where a court determines that the Released Parties are not liable for the injury or loss.

Right to Refuse or Expel and Early Departure: I understand that OB reserves and retains the right, at its sole discretion, to cancel, reject, and/or refuse my admission and/or participation in OB Activities and that OB may expel me for any reason at any time. I further understand that OB may determine that due to medical or emotional reasons, I may be required to terminate participation in the OB Activities. I further understand that if OB exercises these rights all deposits, fees, tuition, or other monies paid to OB are non-refundable. I also agree that I will be financially responsible for all costs related to my early departure from the OB Activities.

Photographic/Video Release: I hereby authorize OB and its Staff to take photographs or videos that may include me in them and to use the same for the promotion of OB, including websites, social media, brochures, newsletters, or in any other OB publication or promotion.

Choice of Law and Forum Selection: I agree that the substantive state law of Maryland (but not any law that would apply the laws of another jurisdiction) governs this document and any dispute or suit I have with the Released Parties. Any mediation, suit, or other proceeding must be filed or brought only in the state court with proper jurisdiction located in Baltimore, Maryland.

Severance: The assumption of risk, release, promise not to sue, indemnity agreement, and all other provisions in this document are intended to be interpreted and enforced to the fullest extent allowed by law. Any portion of this document deemed unlawful or unenforceable is severable and shall be stricken without any effect on the enforceability of the remaining provisions, which shall continue in full force and effect.

Integration: I understand and agree that this Agreement is a fully integrated contract and supersedes any and all oral and/or written expressions by OB about my participation in the OB Activities.

I HAVE CAREFULLY READ, UNDERSTAND, AND VOLUNTARILY SIGN THIS DOCUMENT. I UNDERSTAND THAT I AM SURRENDERING CERTAIN LEGAL RIGHTS. I AGREE THAT THIS AGREEMENT SHALL BE BINDING ON ME AND MY HEIRS AND SURVIVORS. I AGREE TO ALL TERMS AND CONDITIONS IN THIS DOCUMENT.

By electronically typing my signature below, I agree that it has the same legal effect as my handwritten signature. My electronic signature applies to all pages and terms of this liability release.

Signature: _____

Date: _____

Print Name Here: _____

Email: _____