

Parental Waiver and Release Form

As the parent or legal guardian of the child named below, I give my full consent and approval for my child to participate in the ropes rappelling training scheduled on or about June 2025. I understand that there are certain risks of injury inherent in the practice and participation of this training, and I am willing to assume these risks on behalf of my child. I hereby certify that my child is fully capable of participating in this designated activity and that my child is healthy and has no physical or mental disabilities or infirmities that would restrict full participation in these activities.

In addition to giving my full consent for my child's participation, I do hereby waive, release, and hold harmless Iron County, its' Officers, and Representatives for any injury that may be suffered by my child in the participation of the ropes rappelling training thereto, whether the result of negligence or any other cause.

Name of Child	Date of Birth
Street Address	
City	State
Grant Child Participation in Rappelling Train	ing on June 2 rd – 13th, 2025 Yes No
Parent Signature	 Date