

**UNIVERSITY OF CENTRAL MISSOURI  
ASSUMPTION OF RISK AND RELEASE FORM**

*THIS IS A RELEASE OF LEGAL RIGHTS READ AND UNDERSTAND BEFORE SIGNING*

Name of Participant: \_\_\_\_\_ **700#** \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Program/Activity: **Climbing Wall**

This Agreement must be signed by all adult Participants (18 years of age and older) to the University of Central Missouri ("University") Climbing Wall ("Activity"), and by a parent or guardian of all minor Participants. A parent or guardian (referred to in the document as "Parent") signs and agrees for

