

# Oregon Episcopal School Sophomore Backpacking Trip

## **Assumption of Risk and Release**

This trip involves travel by bus and van to and from the Three Sisters and Mount Jefferson Wilderness areas of central Oregon, and backpacking in groups of 8-10 students and 2 adults. One of the adults on the trip will be a professional outdoor instructor and the other adult will be an OES faculty member who has experience backpacking. Each group of 10-12 people will hike 2-9 miles per day, both on and off trails, using map and compass skills that will be taught by the outdoor instructor. Each group will follow a pre-established itinerary, and students will always hike as a group with adult guidance. Groups will travel at elevations of 3500 – 7500 feet, and may be exposed to a broad range of weather conditions. The students will sleep under tarps, and will cook their meals as a group on backpacking stoves.

While the group is backpacking, they may be as far as eight miles from a vehicle-accessible road. In the event of an emergency, medical access may be several hours away. All hired instructors will have Wilderness First Responder first aid training or higher, and all faculty members will have a minimum of Standard First Aid training. All groups will carry a first aid kit designed for the backcountry, and a satellite phone to be used in the event of an emergency.

All students will carry a backpack weighing 25 – 40 pounds with his or her clothing and personal gear and a portion of the group gear. Pack weight will be adjusted according to the size and strength of the student. By its nature, backpacking is a strenuous activity, and while great physical strength is not necessary for participation, good physical condition will enhance the experience. If there is any doubt whatsoever about you/your child's ability to safely participate in this activity, you/your child should have a physical examination by a physician. Oregon Episcopal School (OES) may also require a physician's consent as a precondition for participation.

(Please note: All medical information will be kept confidential and will be made available only to the trip leaders, the OES school nurses and counselors, the division head and the OES Director of Safety.)

Name (print) \_\_\_\_\_

Date of birth: \_\_\_\_\_ Sex \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Allergies and history of anaphylaxis:

What medications (both over-the-counter and prescribed) will you be taking during the trip and why:

Injuries, significant illnesses, or operations you've had in the past two years:

Other physical disabilities or chronic medical or psychological conditions you have:  
(e.g. diabetes, bad knees, asthma, depression, eating disorders, etc.)

Other (diet restrictions, etc.):

(continued on back)

I have read and understand the nature of the activities on the OES Sophomore Backpacking Trip, and I have noted above any medical or physical conditions which might affect my participation in this trip. I recognize that participation in this trip is voluntary on my part and is an encouraged but not a required or mandatory activity. I also recognize that there are certain risks inherent in the participation in this trip which I hereby voluntarily assume, and I release OES, together with its employees, agents, and trustees, from any and all liability (including liability for negligence) for personal injury and property damage suffered by me that may occur as a result of participation in this trip.

Participant's name \_\_\_\_\_

\_\_\_\_\_  
Participant's signature date

\* \* \* \* \*

I have read and understand the nature of the activities on the OES Sophomore Backpacking Trip, and I have noted above any medical or physical conditions which might affect my child's participation in this trip.

By my signature below, I hereby recognize and acknowledge that participation in this trip is voluntary on my child's part and is an encouraged but not a required or mandatory activity. I also recognize that there are certain risks inherent in the participation in this trip which I hereby voluntarily assume, and I release OES, together with its employees, agents, and trustees, from any and all liability (including liability for negligence) for personal injury and property damage suffered by my child that may occur as a result of participation in this trip.

\_\_\_\_\_  
Parent/legal guardian's name

\_\_\_\_\_  
Parent/legal guardian's signature date