PARENTAL INFORMED CONSENT AGREEMENT
FOR CLIMBING/RAPPELLING ACTIVITIES

I understand that participation in the climbing/rappelling activity offered through the ________________ Council, BSA, on ______________ (date), involves a certain degree of risk that could result in injury or death.

In consideration of the benefits to be derived and after carefully considering the risk involved, and in view of the fact that the Boy Scouts of America is an organization in which membership is voluntary, and having full confidence that precautions will be taken to ensure the safety and well-being of my (son/daughter), I have given ________________________________ (name) __________________ (my son/daughter) my consent to participate in ________________________________ (activity) on ______________ (date).

You are about to take part in a climbing experience. While climbing/rappelling, you will undertake a wide variety of physical and mental challenges in an environment designed with safety in mind.

Many participants ask about the physical requirements for taking part in the activity. We find that the best way to answer this question is to compare course activities to a variety of common pastimes with which many of us are familiar.

For most of the time, you will be undertaking activity that is best described as “moderate exertion.” This is comparable to normal walking, golfing on foot, downhill skiing, raking leaves, waiting tables, fishing, calisthenics, hanging wallpaper, interior painting, or slow dancing. There will be some situations where, for a few minutes, you will be engaged in “vigorous exertion.” This is comparable to slow jogging, speed-walking, tennis, swimming, cross-country skiing, shoveling snow, fast biking, mowing with a push mower, pruning trees, heavy gardening, overhead work, ice hockey drills, softball, laying bricks, hurried restaurant work, or climbing a ladder.

If these types of activities are difficult for you, we would like to have you discuss your participation in the activity with a physician who knows your health history. If these are activities in which you regularly engage without difficulty, you should be fit for participation.

Lastly, there are a few specific medical conditions about which participants should always seek advice from their physicians before engaging in climbing/rappelling. If any of these apply to you, you must consult with a physician before participating. If you or your physician have any questions about these conditions or about climbing/rappelling activities, feel free to contact us at ________________________________.

- Pregnancy (The climbing harness can injure the uterus.)
- Kidney or liver transplant (The climbing harness can injure the transplanted organ.)
- Healing fracture or joint injury (You should be cleared by the treating physician.)
- Recent surgery (You should be cleared by the treating physician.)
- Down Syndrome (The participant should have an x-ray check for neck stability as per the recommendations of the Special Olympics.)

I certify that this participant can meet the health and physical fitness requirement of the trip or activity.

In the event of illness or injury occurring to my (son/daughter) while involved in this trip or activity, I consent to X-ray examination, anesthesia, and/or medical or surgical diagnostic procedures or treatment considered necessary in the best judgment of the attending physician and performed by or under the supervision of a member of the medical staff of the hospital furnishing medical services. It is understood that in the event of a serious illness or injury, reasonable efforts to reach me will be made.

(This form must have the signatures of both parents/guardians.)

_________________________  __________________________
Signature                 Signature

_________________________  __________________________
Telephone No.              Telephone No.

_________________________  __________________________
Date                      Date

132