

PATH-WAY Providing Access to Happiness
PARTICIPANT REGISTRATION & RELEASE FORM (January 2022 - January 2023)

General Information: Please complete

Name: _____

Address: _____

City _____ State _____

Zip _____ Phone _____

Email* _____

The undersigned, on behalf of the below mentioned participant, in connection with his/her participation in events held by PATHWAY Providing Access to Happiness, hereby release PATH-WAY Providing Access to Happiness, and its employees, permittees, vendors, agents, representatives, volunteers and those working for or with PATH-WAY ("Providers") from any and all liability, loss, damages, costs, claims and/or causes of action, including but not limited to property damage and emotional and bodily injuries, including death, arising in any way from my or my ward's enrollment or participation in any program, course or recreational activity of every type and description provided or sponsored by the Providers. I understand that my participation in such program, course or recreational activity may involve risk and the possibility of injury to myself, and to others, and of property damage. I hereby release and hold the Providers harmless from liability for any such injury or damage, incurred by me or my ward, and including any injury that may occur as a result of emergency care provided by the Providers. I also hereby indemnify the Providers from any liability, loss, damages, costs, from claims of others who I or my ward may injure while participating in such program, course or recreational activity, including any injury that may occur as a result of emergency care provided to others by the Providers.

The undersigned, or guardian/representative on behalf of the below mentioned participant, in connection with his/her participation in events held by PATH-WAY Providing Access to Happiness **have read and agree with the ELIGIBILITY CRITERIA for Program Participants.**

The undersigned, or guardian/representative on behalf of the below mentioned participant, in connection with his/her participation in events held by PATH-WAY Providing Access to Happiness, and gives my permission for PATH-WAY Providing Access to Happiness to use photographs and/or videotape of me or the participant for publicity and media purposes, including but not limited to internet publications and inclusion in any PATH-WAY publication.

Individual Participant: _____

SIGN above and DATE:

Guardian or legal representative of individual:

Print name and relationship to participant

SIGN above and date

EMERGENCY CONTACT: _____ Phone: _____

Essential Eligibility Criteria for Program Participants

PATH-WAY Providing Access to Happiness

Each participant must:

- Provide own transportation to and from event, and be able to wait independently or with companion (friend, PCA, family member) who accompanies individual and serves as caretaker if transportation is early or late from scheduled event times.
- Come to the program prepared for the weather and conditions of the day, including dressing for the elements and being able to provide own sun/rain protection.
- If an event has no covered protection from the elements we will post this online, and participant must use discretion and come at their own personal risk. Unfortunately, we cannot control the weather.
- Be able to manage personal care such as dressing, toileting, eating and drinking independently or with the assistance of a companion (friend, PCA, family member) who accompanies individual and serves as caretaker.
- Be able to refrain from behaviors that pose a risk (such as aggression, inability to set boundaries, lack of safety awareness,) to self or others.
- Be able to transfer on/off/in/out of equipment independently or with assistance of a companion (friend, PCA, family member) who accompanies individual and serves as caretaker. (This applies to events such as sailing, skating, skiing etc.) Most events will not involve any transfers from your chair.
- Be able to follow verbal and/or visual directions independently or with the assistance of a companion, caretaker or interpreter.
- Be able to alert program staff to your needs/discomforts independently or with the assistance of a companion, caretaker or interpreter
- Be able and willing to wear protective equipment properly, such as helmets and personal flotation devices (This applies to events such as sailing, skating, skiing etc.)
- Use equipment appropriate for personal weight without going beyond the weight capacity of program equipment (This applies to events such as sailing, skating, skiing etc.)
- Refrain from the use of smoking, vaping, or tobacco products while participating in the program
- Not attend a program if you have signs or symptoms of being sick, especially if you have a contagious condition.

I have read and agree to the above eligibility criteria.

Signature _____

Date _____