

**SCSU Outdoor Endeavors
Husky Challenge Course
Medical Disclosure/Health Form**

Name: _____ DOB: _____ Age: _____

Address: _____

Phone: _____ Email: _____

Emergency Contact/Phone Number: _____

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1. Do you have allergies? YES _____ NO _____
If yes, please explain: _____
 2. Are you currently taking medications? YES _____ NO _____
If yes, please explain: _____
 3. Have you had a recent injury, illness or surgeries? YES _____ NO _____
If yes, please explain: _____
 4. Do you have diabetes, epilepsy, or frequent fainting/dizziness? YES _____ NO _____
If yes, please explain: _____
 5. Do you have any neck, back or shoulder pain or joint injury? YES _____ NO _____
If yes, please explain: _____
 6. Do you have a history of heart problems or high blood pressure? YES _____ NO _____
If yes, please explain: _____

If you checked yes to #6 please note the information on the back of this page.

Participant Signature _____ Date _____

Parent/Guardian Name (If participant is under 18) _____

Parent/Guardian Signature (If participant is under 18) _____ Date _____

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Participants with a history of heart problems and/or high blood pressure are at risk while participating on the Husky Challenge Course due to the emotional and physical demands involved. Whereas heart attack and fatalities have occurred in situations where individuals with pre-existing heart/high blood pressure conditions have participated in Husky Challenge Course activities, St. Cloud State University Husky Challenge Course cannot guarantee your physical safety should you choose to participate. St. Cloud State University Husky Challenge Course ask that all participants answering YES to question #6 acquire a written approval from their physician prior to participation.

For General Information Regarding Pregnancy, please note the following:

The activities on a ropes and challenge course involve twisting, turning, lifting, supporting body weights, unexpected physical contact, potential falling from various heights, and waist harness usage. By participating in these activities while pregnant, you will put yourself and your unborn child at risk and in potentially dangerous situations. Should you decide to participate, St. Cloud State University Husky Challenge Course cannot guarantee the safety of you and your unborn child. If you are pregnant and wish to participate, St. Cloud State University Husky Challenge Course asks that you attain a physician's written approval.

I have read the St. Cloud State University Husky Challenge Course Health Forms and fully understand them without question. The information I provided is accurate to the best of my knowledge.

Participant's Signature _____ Date _____

Parent/Guardian Signature (If participant is under 18) _____ Date _____