

 	<p align="center">ARIZONA BOARD OF REGENTS FOR AND ON BEHALF OF NORTHERN ARIZONA UNIVERSITY</p> <p align="center">Contracts, Purchasing and Risk Management 928-523-4557</p> <p align="center">ASSUMPTION OF RISK, WAIVER, RELEASE, AND CONSENT FOR NON-STUDENT MINOR PARTICIPATION</p> <p align="center">Campus Recreation Summer Youth Program</p>	<p>Health and Learning Center PO Box 4067 Flagstaff, AZ 86011</p> <p>Revised 01/27/2026</p>
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Program Information

THIS DOCUMENT HAS LEGAL CONSEQUENCES. IT MUST BE COMPLETED AND SIGNED PRIOR TO PARTICIPATION. PLEASE READ IT CAREFULLY BEFORE SIGNING.

Program Description and Dates: **Campus Recreation Summer Youth Programs, May 2026 - August 2026**

Department Contact (name, e-mail, phone): **Campus Rec Professional Staff, summercamp@nau.edu 928-456-6989**

Program Location: **Health & Learning Center (025), ATC Field, WAC, NAU Campus, and off-campus locations**

Specific Potential Risks to Participants: **injury as a result of falling/landing on the ground, fitness/exercise/sport specific injuries, minor bumps/scrapes, and outdoor related risks (dehydration, heat illness, sunburn, etc.)**

Parent/Guardian Agreement

I affirm that I am the adult parent or legal guardian of _____, a Non-Student Minor under the age of eighteen (18), and I consent to their participation in this Program. In consideration of allowing Non-Student Minor to participate in this Program and related activities, I, on behalf of Non-Student Minor and for myself and my spouse, if any, and our heirs, successors, and assigns:

1. Acknowledge and understand that allowing Non-Student Minor to participate in the Program may involve a variety of activities. Such participation, particularly in field trips, “wilderness trips,” sports camps, and physical education, may involve risks, including but not limited to, serious personal injury, partial or permanent disability, sickness, disease or illness, property damage, and/or death. These risks may result from Non-Student Minor’s own actions or inactions, from the actions or inactions of others, or may be inherent to participating in the Program. I understand that I am responsible for ensuring that Non-Student Minor is properly prepared for all Program activities, and I represent that Non-Student Minor is in good health and is able to participate fully in all Program activities. If the Program is an on-line activity, risks include but are not limited to, data mining, phishing, viruses, malware, data breach of on-line information, cyberbullying, exploitation, cyber stalking, on-line grooming, cyber predators, and image replication. Knowing these risks may occur in an on-line Program, I choose to have Non-Student Minor participate in the Program. I also understand that Northern Arizona University is not an agent of and has no responsibility for any third party that may provide any services during the

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Program, including but not limited to, food, lodging, travel, and equipment associated with the Program. I acknowledge that Northern Arizona University has taken enhanced health and safety measures, in accordance with guidelines from the U.S. Centers for Disease Control and Prevention, in response to the COVID-19 pandemic. An inherent risk of exposure to COVID-19 exists in any public place where people are present. COVID-19 is an extremely contagious disease that can lead to severe illness and death. By allowing Non-Student Minor to attend the Program at Northern Arizona University, I voluntarily assume all risks related to Non-Student Minor's exposure to COVID-19.

2. Assume all of the foregoing risks and accept personal and financial responsibility for all damages for personal injury, partial or permanent disability, property damage, or death of Non-Student Minor, or caused by Non-Student Minor, to the fullest extent allowed by law.

3. Agree not to sue the State of Arizona, the Arizona Board of Regents, Northern Arizona University, their officers, employees, agents, and assigns, and waive all claims, demands, losses, or damages on account of personal injury, partial or permanent disability, property damage, or death, caused or alleged to be caused in whole or in part by the actions of any person or entity, to the fullest extent allowed by law.

4. Grant to Northern Arizona University and to its employees, agents and assigns the right to photograph Non-Student Minor and use the photo and or other digital reproduction of them or other reproduction of their physical likeness for publication purposes for use in connection with Northern Arizona University Programs, whether electronic, print, digital or via the Internet, so long as I have signed the Non-Student Minor Release Form.

5. Understand that the only medical treatment that will be provided by the Program is for such things as minor scrapes and bruises. Any medical costs, including emergency medical treatment that may be incurred as a result of Non-Student Minor's participation in the Program will be my financial responsibility. I further understand that medical care facilities may not be immediately available and I accept the increased risk in the event of injury or death.

6. Hereby consent to Northern Arizona University and any appropriate medical facility, and/or to the physician(s) listed below, providing whatever medical services they may deem necessary for Non-Student Minor in the event of an emergency. I certify that I have adequate insurance and/or other means to pay for any costs and expenses related to these services and I agree to bear such costs and expenses in full.

7. Agree to review Program rules with Non-Student Minor and agree Non-Student Minor will comply with Northern Arizona University rules, standards, as well as any specific standards of conduct of the Program that may be provided. I understand that Non-Student Minor is not permitted to consume alcohol, possess/use weapons or illegal substances, or engage in sexual activities while participating in the Program. I understand Non-Student Minor may be removed from the Program for misconduct or failure to follow rules or instructions of Northern Arizona University or for any behavior detrimental to or incompatible with the standards of Northern Arizona University or the Program, and I understand that in that event I may not be entitled to a refund of any or all Program fees and costs.

8. Waive and release all claims against the State of Arizona, the Arizona Board of Regents, and Northern Arizona University, their officers, employees, agents, and assigns that arise at a time when Non-Student Minor is not under the direct supervision of Northern Arizona University or that are caused by Non-Student Minor's failure to remain under such supervision or to comply with rules or instructions, to the fullest extent allowed by law.

9. Acknowledge and understand that either the Non-Student Minor or Northern Arizona University has the right to decline, decrease, or cease Non-Student Minor's participation in the event of illness, injury or other medical condition.

10. Understand that Northern Arizona University may reduce or stop Non-Student Minor's participation, in its sole discretion, in the best interest of safety or to aid in the well-being of other participants. Northern Arizona University may require further assessment and medical clearance from a physician prior to participation in the Program.

11. **INITIAL:_____ . If participating in the Climbing Wall, I have reviewed, understand, and agree to abide by the Climbing Wall Orientation Rules and Regulations.**

ACKNOWLEDGE THAT I HAVE CAREFULLY READ THE ABOVE ASSUMPTION OF RISK, WAIVER, RELEASE, AND CONSENT FOR NON-STUDENT MINOR PARTICIPATION FORM AND UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT VOLUNTARILY.

No oral or written representations can or will alter the contents of this document. I agree that this document shall be governed by the laws of the State of Arizona.

Parent/Legal Guardian Signature:

ARIZONA BOARD OF REGENTS FOR AND ON BEHALF OF NORTHERN ARIZONA UNIVERSITY

Contracts, Purchasing and Risk Management _____
928-523-4557 _____

BEHAVIORAL EXPECTATIONS FOR NON-STUDENT MINORS

Campus Recreation Summer Youth Program

THIS DOCUMENT HAS LEGAL CONSEQUENCES. IT MUST BE COMPLETED AND SIGNED PRIOR TO PARTICIPATION. PLEASE READ IT CAREFULLY BEFORE SIGNING.

If not defined within the form, all capitalized words shall have the meaning as set forth in the Northern Arizona University Supervision of Non-Student Minors Policy.

Northern Arizona University is committed to providing a safe, enjoyable, and healthy learning environment for all Non- Student Minors involved in Programs on its campus to include virtual or on-line programs. Northern Arizona University encourages an environment of mutual respect. In

order to promote the health and safety of all involved, participation by a Non-Student Minor may be terminated at the discretion of Program staff if the Non-Student Minor does not abide by these expectations.

Non-Student Minors are expected to follow all Northern Arizona University policies as well as the guidelines listed below:

1. Work cooperatively and respectfully with other Participants, volunteers, faculty, and staff.
2. Follow established Program rules and directions.
3. Use appropriate language and behavior at all times. Language or behavior that is abusive, harassing, or threatening may result in removal or suspension from the Program.
4. Use all Northern Arizona University property and materials appropriately. Charges may be incurred in the event of misuse or damage.
5. Dress appropriately for the activities as directed by Program staff, including the use of safety gear where required.
6. Remain on property where the Program is held or with the group at all times. Participants should not leave the property or group without prior notification and authorization from Program staff.
7. Obey all local, state, and federal laws.
8. Do not bring any prohibited items to Program activities and events, including for example tobacco, alcohol, drugs, illicit material, or weapons. Northern Arizona University's campus and facilities are weapons and tobacco-free.
9. Do not host guests in Northern Arizona University-owned or provided overnight accommodations without express permission from Program staff.
10. Report to Program staff any abuse or neglect committed against any Non-Student Minor during the Program.

Parent/Legal Guardian Certification
I certify that I have read, understand, and discussed the above expectations with my Non-Student Minor.
Parent/Legal Guardian Name:
Parent/Legal Guardian Signature:

ARIZONA BOARD OF REGENTS FOR AND ON BEHALF OF NORTHERN ARIZONA UNIVERSITY

Contracts, Purchasing and Risk Management
928-523-4557

DISCLOSURE AND APPROVAL OF ONE-ON-ONE INTERACTION WITH NON-STUDENT MINORS

Campus Recreation Summer Youth Program

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If not defined within the form, all capitalized words shall have the meaning as set forth in the Northern Arizona University Supervision of Non-Student Minors Policy.

Program Supervisor Information

Name: Chris Aungst

Title: Director, Campus Recreation

Phone: 928-523-9500

Email: Chris.Aungst@nau.edu

One-on-One Interactions with Non-Student Minor Information

Describe necessity for One-on-One Non-Student Minor Interaction(s):

To escort campers to and from restroom facilities within Campus Recreation and HLC and during field trips within the Flagstaff locale. Escort may be requested by the camper or recommended by parent/guardian.

Describe the nature of the One-on-One Non-Student Minor Interactions:

Escorting to and from facilities only. Summer Camp staff member will wait outside of rest area during use

Describe the setting(s) of the One-on-One Non-Student Minor Interactions:

HLC Recreation Center, Wall Aquatic Center, Flagstaff locale including Harkins, Flag Tag, ect.

Describe safeguards that will be implemented for One-on-One Non-Student Minor Interactions:

Camper found in misconduct toward staff or campers, they will receive a referral to camp admin. Staff members found in misconduct toward staff or campers are subject to NAU disciplinary process.

List of Authorized Adults that could have One-on-One Non-Student Minor Interactions:

Will provide staff roster once hiring process has been completed

Authorization

With my signature below, I authorize the above-named Program to have One-on-One Non-Student Minor Interactions

between the Authorized Adults named herein and Non-Student Minors and certify all Authorized Adults have successfully completed any required training and passed required background and fingerprint screenings.

Program Supervisor Signature:	Date:
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Parent/Legal Guardian Approval

I understand that the above-named Program may involve One-on-One Interaction, as defined in Northern Arizona University's Supervision of Non-Student Minors Policy and in this form, with my Non-Student Minor and, by signing

below, I authorize my Non-Student Minor to participate in the Program.

Parent/Legal Guardian Name:	Non-Student Minor Name:
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Parent/Legal Guardian Signature:	Date:
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**ARIZONA BOARD OF REGENTS FOR AND ON BEHALF OF NORTHERN ARIZONA UNIVERSITY
ASSUMPTION OF RISK, WAIVER, AND RELEASE FOR PARTICIPATION IN
VOLUNTARY PROGRAMS FOR MINORS**

**THIS DOCUMENT HAS LEGAL CONSEQUENCES. IT MUST BE COMPLETED AND SIGNED PRIOR TO PARTICIPATION.
PLEASE READ IT CAREFULLY BEFORE SIGNING.**

Program (describe and include dates):	SYP – NAU Challenge Course and Climbing Wall
Department Contact (name, email, phone):	Outdoors@nau.edu
Program Location:	Challenge Course and Climbing Wall
Specific Potential Risks of Program:	injury as a result of falling/landing on the ground, hand/finger injuries, fitness/exercise specific injuries

Participant's Name: _____

In consideration of being allowed to participate in the above-mentioned Northern Arizona University ("NAU" or "University") Program, I, _____ ("guardian"), on behalf of myself and my spouse, if any, and our heirs, successors, and assigns:

- Acknowledge and understand that participation in the Program may involve a variety of activities. Such participation, particularly in field trips, "wilderness trips", and similar events, may involve risks, including but not limited to, serious personal injury, partial or permanent disability, property damage, and/or death. These risks may result from my own actions or inactions, from the actions or inactions of others, or may be inherent to participating in the Program. I also understand that Northern Arizona University is not an agent of and has no responsibility for any third party that may provide any services during the Program, including but not limited to, food, lodging, travel, and equipment associated with the Program. I understand that I am responsible for ensuring that I am properly prepared for all Program activities, and I represent that I am in good health and am able to participate fully in all Program activities.
- Assume all of the foregoing risks and accept personal and financial responsibility for all damages for personal injury, partial or permanent disability, property damage, or death, caused by me, to the fullest extent allowed by law.
- Agree not to sue the State of Arizona, the Arizona Board of Regents, Northern Arizona University, their officers, employees, agents, and assigns, and waive all claims, demands, losses, or damages on account of personal injury, partial or permanent disability, property damage, or death, caused or alleged to be caused in whole or in part by the actions of any person or entity, to the fullest extent allowed by law.
- Grant to NAU and to its employees, agents and assigns the right to photograph me and use the photo and or other digital reproduction of me or other reproduction of my physical likeness for publication processes for use in connection with University Programs, whether electronic, print, digital or via the Internet.
- Understand that medical care facilities may not be immediately available and I accept the increased risk that may pose in the event of injury.
- Understand that NAU does not have medical personnel available at the Program location, and I agree that any medical costs, including emergency medical treatment that may be incurred as a result of my participation in the Program will be my financial responsibility.
- Hereby consent to NAU, any appropriate medical facility, and/or to the physician(s) listed below, providing whatever medical services they may deem necessary in the event of an emergency. I certify that I have adequate insurance and/or other means to pay for any costs and expenses related to these services and I agree to bear such costs and expenses in full.
- Agree that I will comply with NAU's rules, standards, and instructions for student behavior, including the Student Code of Conduct, as well as any specific standards of conduct of the Program that may be provided to me.
- Waive and release all claims against the State of Arizona, the Arizona Board of Regents, and Northern Arizona University, their officers, employees, agents, and assigns that arise at a time when I am not under the direct supervision of NAU or that are caused by my failure to remain under such supervision or to comply with rules or instructions, to the fullest extent allowed by law.
- Acknowledge and understand that it is the Participant's sole responsibility to decline, decrease, or cease participation in the event of illness, injury or other medical condition. Understand that the University may reduce or stop Participant's participation, in its sole discretion, in the best interest of safety or to aid in the well-being of other participants. University may require further assessment and medical clearance from a physician prior to participation in the Program.
- ACKNOWLEDGE THAT I HAVE READ THE ABOVE ASSUMPTION OF RISK, WAIVER, AND RELEASE, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT VOLUNTARILY.

Guardians Signature: _____ **Date:** _____



Contracts, Purchasing,
and Risk Management

**ARIZONA BOARD OF REGENTS
FOR AND ON BEHALF OF
NORTHERN ARIZONA UNIVERSITY**
Contracts, Purchasing and Risk Management
NON-STUDENT MINOR IMAGE RELEASE

NAU Summer Youth Program

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If not defined within the form, all capitalized words shall have the meaning as set forth in the Northern Arizona University Supervision of Non-Student Minors Policy.

I am the parent or legal guardian of _____ (Non-Student Minor).

On behalf of the Non-Student Minor, I grant permission to the Arizona Board of Regents, for and on behalf of Northern Arizona University and its agents or employees, to make and/or use photographs, videos, or digitally recorded images (Images) taken of the Non-Student Minor while participating in the above named Program, for use in Northern Arizona University publications such as recruiting brochures, newsletters, and magazines, and to use such Images on display boards, or electronic versions of the same publications, or on Northern Arizona University websites or other electronic forms or media, and to offer them for use or distribution in other non-Northern Arizona University publications, electronic or otherwise, without notifying me.

I waive any right to inspect or approve the finished Images or printed or electronic matter that may be used in conjunction with them now or in the future, whether that use is known or unknown to me, and I waive any right to royalties or other compensation arising from or related to the use of the Images.

I agree to release and hold harmless the Arizona Board of Regents, on behalf of Northern Arizona University and its agents or employees, and any firm publishing and/or distributing the finished product in whole or in part, whether on paper or via electronic media, from and against any claims, damages, or liability arising from or related to the use of the images, including but not limited to any misuse, distortion, blurring, alteration, optical illusion, or use in composite form, either intentionally or otherwise, that may occur or be produced in taking, processing, reduction, or production of the finished product, its publication or distribution.

Parent/Legal Guardian Name:

Parent/Legal Guardian Signature:

Date: