



**Who's eligible to ZIP?**

1. A minor may zip if the parent or guardian is present with them on the trip and/or signed minor's waiver form. Minors 13 – 17 years old must have a waiver signed by a parent/guardian and be accompanied by an adult chaperone. A child 12 or under must have a parent/guardian on site.
2. Anyone may zip who weighs at least 80 pounds, is 6 years old or older and is at least 48 inches tall.
3. Anyone may zip who has a level of maturity that would allow them to handle instructions and be at height off the ground.
4. Anyone may zip who can listen to instructions and stay focused. There will be times of rest and relaxation on the tours while at height.
5. Anyone may zip who is able to reach the various safety clip-in points. The tour guides will attach the clients, but the participant should be able to climb around and reach hand holds and cables during the tour.
6. In order to zip, the participant must fit in the harnesses we have. The harnesses we use will usually fit sizes from 80 pounds up to 260 pounds and are rated to 7,000 pounds. Smaller or larger sizes are not always available.

**Assertion of understanding**

I maintain that I am, and/or my child is, in satisfactory condition and may engage in activities on the Carolina Blue Sky Zip Line, facilitated by Carolina Adventure World (CAW). I am aware that Blue Sky programs involve participants in a variety of outdoor activities. I acknowledge that I am aware of the risks involved in Carolina Blue Sky Zip Line activities such as scrapes, bruises, rope burn, or other, and that these injuries can and sometimes do occur within the content of course programs.

**Consent to necessary medical treatment**

I give permission to Carolina Adventure World to render first aid and/or call upon Emergency Medical Services, if needed, for my and/or my child's well-being.

**Waiver and Release of Liability and indemnity agreement**

I further agree to indemnify, protect, defend, and hold harmless CAW and its staff, leaders, volunteers, and/or agents from and against any cost, damage, expense, claim, or liability caused by or arising out of my use of, presence at, participation in, or trip to and from the locations utilized by CAW, including any injury or death of any person, any damage to any real or personal property on or about CAW or belonging to CAW and any attorney's fees and/or costs arising out of this agreement. I, the undersigned, hereby waive any and all claims that I or my heirs may have against the staff, leaders, volunteers, and/or agents of CAW for any injuries or property damages which may arise while I am attending and/or participating in a CAW tour. I acknowledge that this waiver includes any claim for wrongful death, personal injury or property damage suffered by myself, caused by or arising out of the negligence of CAW or its staff, leaders, volunteers, and/or agents. I further agree that if I and/or my child cannot adjust to a CAW tour, CAW shall have the right to ask me to leave and/or discontinue participation in the tour. In the event of dispute, jurisdiction will be Fairfield County, State of South Carolina; venue will be Fairfield County, State of South Carolina.

**Adult Information**

Print Participant Name: \_\_\_\_\_ Participant Age & D/B: \_\_\_\_\_

Participant Signature: X \_\_\_\_\_ Date: \_\_\_\_\_

**Parent/Legal Guardian of Minor Information:**

Print Minor Participant Name: \_\_\_\_\_ Minor's Age & D/B: \_\_\_\_\_

Print Parent/Legal Guardian Name: \_\_\_\_\_ Driver's License #/State \_\_\_\_\_

I affirm I am the Parent/Legal Guardian of Minor: X \_\_\_\_\_ Date: \_\_\_\_\_