



## Participant Workshop Info & Checklist

This information is provided to introduce you to the benefits, challenges, and responsibilities associated with participation in UC Irvine's Team Up! Program. Please read the following carefully:

### What is adventure education?

Adventure education is the purposeful use of activities in which there are real and perceived risks and where the outcome is influenced by the participants. The Team Up! program is founded upon the idea of learning by doing, and its purpose is to give people opportunities to develop awareness and skills that lead to personal and group achievement.

### What will I be doing?

Some workshops may take place in an outdoor setting, which can present some inherent dangers. Adventure activities can be physically demanding and may include running, jumping, being lifted, and lifting or spotting others. The workshops can be mentally, socially, and emotionally challenging as well. The workshop curriculums vary but may contain components from a combination of some or all of the following experiential education areas: Ice-Breakers, Energizers, and Team Building and Problem Solving initiatives.

### Do I have choices while at the Challenge Course?

Your Team Up! facilitators will make every reasonable effort to teach the associated skills and safety procedures which help to create a supportive environment in which accepting challenges is encouraged. Your responsibility is to make appropriate choices regarding your participation in the activities, based on your understanding of the benefits to be gained, risks involved, and your personal health. For the high ropes course, there are 2 limiting factors to participation:

- 1) Participants will be taught how to self-rescue on our ground school course, and they must be able to perform this action to gain access to our high ropes course. This will be determined by the Team Up staff.
- 2) Our zip line has a weight limit of 250lbs, so any persons over that weight will need to inform their assigned staff member and exit our course via cargo net.

### What are some of the risks?

Taking risks in a supportive and safe atmosphere is vital to experiential education. Safety is the number one priority while participating in challenging activities. Ultimately you will decide upon your own level of risk taking utilizing the challenge by choice philosophy. Risks taken may be physical, emotional, social, or a combination. By taking risks, we learn more about ourselves and our interactions with others. Team Up! programs strive to provide a safe environment in which to explore these challenges, however participation is ultimately at your own risk and your safety cannot be guaranteed.

### Please follow these guidelines when preparing for your Team Up! program workshop:

- We will meet out beyond the tennis courts at the very obvious High Ropes course. (See Map)
- Dress comfortably (Shorts okay, but no short shorts) and be prepared for variable weather conditions.
- Wear good-fitting shoes with thick soles (the thicker the better)— no sandals or open toed shoes!
- Use sun protection or a hat
- Sunglasses are OK
- Bring a bottle for water that we provide, this supports our sustainability efforts on campus (less waste)
- Please bring snacks if needed
- Remove keys or other sharp objects from pockets
- Avoid wearing dangling jewelry
- Restrooms and water fountains are located in close proximity to the course
- Be prepared to challenge yourself and have fun!

All participants are required to read and sign the Waiver of Liability & Assumption of Risk agreement prior to participation. Please bring the completed waiver with you to the Program.



## PAR-Q1 Medical/Physical Self-Assessment Questionnaire

This PAR-Q form has been designed to help identify the small number of adults for whom physical activity may be inappropriate or those who should have medical advice concerning our program's type of activity.

This questionnaire is for self-assessment purposes only.  
Please **DO NOT RETURN** this form to UCI Team Up program.

1. Has your doctor ever said that you have a heart condition and that you should only do physical activity recommended by a doctor?
2. Do you feel pain in your chest when you do physical activity?
3. In the past month, have you had chest pain when you were not doing physical activity?
4. Do you lose balance because of dizziness or do you ever lose consciousness?
5. Do you have a bone or joint problem (i.e. back, knee, or hip) that could be made worse by a change in your physical activity?
6. Is your doctor currently prescribing drugs (such as water pills) for your blood pressure or heart condition?
7. Do you have uncontrolled diabetes, epilepsy, or seizures?
8. Are you pregnant or post-partum (less than 6 weeks since giving birth)?
9. Have you ever had a kidney transplant? Our safety equipment and harness will put pressure in the area of your kidney.
10. Do you know of any other reason why you should not do physical activity?

If you answered **YES** to any question:

Please talk with your doctor **BEFORE** you participate in the UCI Team UP program. Tell your doctor about the PAR-Q questions and to which ones you answered YES. If attending our program and you have concerns, please relay pertinent health information (in a way you see fit) to the Team Up staff of your event, so they are aware and can work with you to help manage your concerns.

The UCI Team Up program and events will require moderate to strenuous physical exertion, specifically if participating on the ropes course.

Zipline Weight Restrictions: The zipline hydraulic systems have a weight range of 50 to 250 pounds. Please speak with your Lead Facilitator if your weight falls outside of this range to discuss alternative options for exiting the course. Your weight does not impact your accessibility to the rest of the Odyssey High Ropes Course.



**PALOS VERDES PENINSULA UNIFIED SCHOOL DISTRICT  
OFF-CAMPUS FIELD TRIP AUTHORIZATION  
PARENT PERMISSION FORM**

**DEAR PARENT/GUARDIAN:**

A trip is planned on October 26, 2018 to UCI Team Up, Irvine, California.

METHOD OF TRANSPORTATION will be by bus.

The bus will leave Rancho del Mar High School at 8 a.m. (please note time!) and return at approximately 2 p.m.

If you would like your son/daughter to attend, please sign and return this consent slip to the school office as soon as possible. There are limited seats in the bus, so those who return the form first will be able to go. Feel free to contact Mrs. Maltese at 310-750-2285 or maltesee@pvpusd.net if you have any questions/concerns.

I give (student name) \_\_\_\_\_ permission to attend the activity. In case of emergency, I may be contacted at( \_\_\_\_ ) - \_\_\_\_ - \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**METHOD OF TRANSPORTATION**

Bus- Van

No District transportation provided (NOTE: It will be the obligation of the parent/guardian to provide transportation to and from the activity.)

Automobile, driven by one of the following (check one):

Parent;  Guardian;  Self (must complete form F603);  Volunteer (Forms 604 (a) and 604 (b) – see attached)

**PALOS VERDES PENINSULA UNIFIED SCHOOL DISTRICT  
Acknowledgment of Student Understanding**

As a student participating in an extra- or co-curricula program/activity sponsored by the Palos Verdes Peninsula Unified School District, I agree to comply fully with all school, district, and state regulations pertaining to pupil behavior/conduct.

I understand that the school administration and/or faculty advisor/coach/sponsor has responsibility for supervision and control of all student participants in the specified program/activity and agree to follow their direction during the full duration of the participation period.

I further understand that I will be subject to immediate suspension, administrative transfer, and/or expulsion for any narcotics or alcohol involvement -- whether it be for possession, use, and/or sale -- as well as for violation of any school, district, *Education Code*, *Administrative Code*, or *Penal Code* provision relating to my behavior or conduct. In addition, I am aware that a violation(s) on my part will result in my being referred to the athletic or activity council at my assigned school for additional disciplinary action as appropriate.

I acknowledge that I have been given a copy of the current disciplinary guidelines governing student behavior and am aware of the consequences contained therein for the specified violations.

Student Participant's Full Name (please print):	Signature of Student Participant:	Date

**Parent/Guardian Acknowledgment and Authorization**

The above student is hereby authorized to participate in the field trip scheduled by Rancho del Mar High School.

I have read the above acknowledgment of student understanding and, as the parent/guardian, am aware that violation of rules and regulations relating to student conduct and/or reasonable directives given by the faculty advisor and/or adult chaperone(s) will result, not only in the corrective actions outlined above, but, in the case of out-of-the-area and/or out-of-state field trips, immediate parent/guardian notification and return of the student at parent/guardian notification and return of the student at parent/guardian expense to his/her home via the next available transportation.

Permission is hereby granted to the faculty advisor and adult chaperone(s) to obtain medical or surgical care from a licensed physician for the student in the event of a serious accident or illness. I understand that every attempt will be made to contact me in any such medical emergency. Pursuant to *Education Code* Section 35330, I hereby waive any claim(s) against the Palos Verdes Peninsula Unified School District for injury, accident, or illness occurring during or by reason of the field trip or activity specified above.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Principal: *Nicah Farrell*

Date: October 26, 2018

