

**University of Rochester First-Year Orientation Outing Treks (FOOT)  
PERMISSIONS & LIABILITY WAIVER**

**PART I  
ACKNOWLEDGEMENT AND RELEASE AGREEMENT**

I, \_\_\_\_\_, wish to participate in the University of Rochester First-Year Orientation Outing Treks (the Activity) offered by the University of Rochester.

*If participant is younger than 18 years:* I, \_\_\_\_\_, am the parent or legal guardian of \_\_\_\_\_, whom I wish to participate in the University of Rochester First-Year Orientation Outing Treks (the Activity) offered by the University of Rochester.

As a precondition to my participating in the Activity, I have read the following Release Agreement and agree to its terms.

**1. Assumption of Risk.** I understand that participating in the Activity entails inherent risks including, but not limited to, the risks described in this Activity Detail Form on the reverse side of this Release Agreement. I have read and understood the Activity Detail Form. I have been given the chance to ask questions about the Activity Detail Form and all such questions have been answered to my satisfaction. Having read this form, I am fully aware of the risks and hazards associated with the Activity, and hereby elect to voluntarily participate in the Activity. I voluntarily assume full responsibility for any risks of loss, property damage, or personal injury, including death, that I may sustain as a result of participating in the Activity, unless caused by the gross negligence or willful misconduct of the University of Rochester, its officers, trustees, agents, employees or volunteers (the "Releasees"). I understand that I am not required to participate in the Activity and that I choose to voluntarily and free of duress.

**2. Liability Release.** In consideration for the University of Rochester allowing me to participate in the Activity, I agree I will not sue the Releasees and I hereby release and indemnify the Releasees from any and all liabilities, claims, demands, actions, causes of actions, costs, and expenses of any nature whatsoever arising out of any loss, personal injury (including death), or property damage that I may sustain, arising from the Activity or while upon the premises where the Activity is being conducted, unless due directly to the gross negligence or willful misconduct of the Releasees.

**3. Statement of Physical Fitness.** I state that I am physically fit and in a condition that will allow me to participate fully and safely in the Activity. I maintain medical insurance that covers me for accidents and illnesses while I am participating in this Activity. I understand the Releasees have not made, nor will make, any investigation into my physical fitness or ability to participate in the Activity and Releasees are relying on my statement of my physical condition. I assume full responsibility for payment of medical expenses not covered by my insurance incurred as a result of my participation in the Activity.

**4. Emergency Medical Treatment.** I grant the Releasees permission to authorize emergency medical treatment as they deem appropriate and agree that such action by the Releasees shall be subject to the terms of this Agreement. I understand and agree that the Releasees assume no responsibility for any injury or damage that might result from such emergency medical treatment.

5. **Governing Law.** I agree that this Agreement and any claim arising from my participation in the Activity shall be construed in accordance with the laws of the State of New York, without regard to its conflict of law principles. The courts in Monroe County shall be the forum for any lawsuits arising from the Activity or relating to this Agreement. The terms of this Agreement shall be severable, such that if a court of competent jurisdiction holds any term to be illegal or unenforceable, the validity of the remaining portions shall not be affected thereby.

In the event of an emergency, the emergency contact that is listed on my registration form will be contacted via phone by a staff member as soon as possible.

**PART I**  
**ACTIVITY DETAIL FORM**

**Name of Activity:** University of Rochester First-Year Orientation Outing Treks

**Date(s) of Activity:** Saturday, August 22, 2026, Sunday, August 23, 2026 and Monday, August 24, 2026

**Location of Activity:** Letchworth State Park (hiking), Chimney Bluffs (hiking), Genesee Valley Park (kayaking), and Central Rock Gym Rochester (indoor rock climbing)

**Description of Activity:** Participation in the University of Rochester First-Year Orientation Outing Treks will include walking, hiking, indoor rock climbing and kayaking.

**By participating in these activities, you may be exposed to several inherent risks, including but not limited to those listed here:**

Physical injury, including but not limited to broken bones, concussions or other head injuries, organ damage, torn ligaments and tendons, cardiac injury, and even death. These may be accompanied by psychic injury or mental anguish. These risks may result from participation in these Outing Treks.

**Risks from exposure to COVID-19, including but not limited to costs and physical impact as a result of exposure or infection (which could result in quarantine, isolation, medical treatment, permanent injury and/or death).**

In signing this Agreement, I acknowledge that I have read both sides of this Release Agreement form, understand it, and agree to be bound by its terms. I further acknowledge that I sign this Release Agreement voluntarily and I am at least eighteen years of age.

\_\_\_\_\_  
Name of Participant (printed)

\_\_\_\_\_  
Signature of Participant (if over 18)

\_\_\_\_\_  
Name of Parent or Legal Guardian (printed)  
*If participant is younger than 18 years*

\_\_\_\_\_  
Signature of Parent or Legal Guardian  
*If participant is younger than 18 years*

\_\_\_\_\_  
Phone number where parent/legal guardian  
can be reached in case of emergency

\_\_\_\_\_  
Date

**THIS IS A RELEASE OF LEGAL RIGHTS. READ AND UNDERSTAND BEFORE SIGNING.** (Rev. 4/98)

PART II  
UNIVERSITY OF ROCHESTER FIRST-YEAR ORIENTATION OUTING TREKS  
RULES AND REGULATIONS

As members of the University of Rochester community, program participants (hereafter "Students") are expected to engage in community-building activities. It is also expected that personal integrity, respect for the rights of others, and a positive attitude will enable Students to maintain the highest standards.

This Code of Conduct is intended to promote group cohesiveness and foster an environment conducive to the achievement of the Program's goals. If a Student is unsure what this Code or any policy means, they have the obligation to ask FOOT program staff.

Compliance with this Code of Conduct is required of all Students. Failure to comply may, at the discretion of the University, result in dismissal from the Program.

**Respect for Others:** Program participants shall be respectful of the University of Rochester community, which includes people with diverse backgrounds and beliefs. Conduct that is disrespectful or demeaning to others, including but not limited to verbal or physical harassment, will not be tolerated.

**Prohibited Activities:** The following actions are prohibited during any part of the Program (including field trips and transportation, as well as on the University's campuses):

- Failure to adhere to all University policies, rules, and regulations
- Possession, use, distribution, or being in the presence of alcohol or illegal drugs
- Misuse of prescription drugs
- Possession or use of weapons (including but not limited to firearms, fireworks or other explosive materials, knives, or other items intended or commonly used to inflict harm)—any weapon found will be confiscated.
- Disorderly Conduct (including but not limited to):
  - Fighting, including hitting or pushing another person, either as an aggressor or in response to actions of another
  - Behavior that is otherwise reckless, disruptive, or dangerous to person or property
  - Verbal or physical harassment of others, including but not limited to bullying, cyberbullying and playing pranks or practical jokes, including via electronics
  - Misuse of, damage to, or theft of University of Rochester property
  - Tampering with or misusing fire or emergency equipment
  - Use of a camera, cell phone or other video or audio recording device in spaces where privacy is expected, such as restrooms, showers, locker rooms and bedrooms being used by others. Anyone who wishes to record classroom instruction must request the permission of the instructor.
  - Failure to comply with the reasonable request of a University of Rochester official
  - Interaction of a sexual nature or sexually suggestive manner with any other person

**Responsibility for Damage:** Students and parents may be held financially responsible for any damage to or loss of University of Rochester property caused by Students.

In signing this Agreement, I acknowledge that I have read Part II of this Release Agreement form, understand it, and agree to be bound by its terms. I further acknowledge that I sign this Release Agreement voluntarily and I am at least eighteen years of age.

\_\_\_\_\_  
Name of Participant (printed)

\_\_\_\_\_  
Signature of Participant (if over 18)

\_\_\_\_\_  
Name of Parent or Legal Guardian (printed)  
*If participant is younger than 18 years*

\_\_\_\_\_  
Signature of Parent or Legal Guardian  
*If participant is younger than 18 years*

\_\_\_\_\_  
Emergency Contact Name

\_\_\_\_\_  
Emergency Contact Phone Number

\_\_\_\_\_  
Date

**PART III**  
**EMERGENCY CONTACT INFORMATION**

In the event of an emergency during the activity that requires immediate contact of the staff, a participant, or UR Security, please use the contact information listed below.

**Crystal Cusimano-Figueroa**  
Assistant Dean of Students  
[crystal.cusimano@rochester.edu](mailto:crystal.cusimano@rochester.edu)  
(585) 236-3364 (cell phone)  
(585) 275-4414 (office number)

**University of Rochester Department of Public Safety**  
(585) 275-3333

In the event of an emergency (medical, behavioral, disaster, or significant program disruption) during the activity that requires immediate contact of the participant's parent/guardian, the staff will use the emergency contact name and phone number which were provided by the participant. This information is recorded and filed by the staff as a part of the registration process.

**PART IV**  
**STUDENT PLEDGE**

**Student Pledge:** I agree to attend all scheduled training, participate in all events, and to abide by the rules and regulations given in this form and in supplemental materials. I have read and understood this Code of Conduct. I understand that if I do not comply, I may be dismissed from the FOOT program.

**Participant Name:** \_\_\_\_\_

**Participant Signature:** \_\_\_\_\_

**Date Signed:** \_\_\_\_\_