



**DENVER**  
PARKS & RECREATION

## Outdoor Recreation

### Genesee Experiential Outdoor Center

### Urban Teambuilding

Please complete this electronic form by typing all in requested information and submitting to the address, e-mail, or fax below.

#### CONTACT INFORMATION

School Name: \_\_\_\_\_  
Student Name: \_\_\_\_\_  
Parent Name: \_\_\_\_\_  
Phone: \_\_\_\_\_

#### URBAN TEAMBUILDING

##### Urban Teambuilding - at Your Site

Our portable program arrives at your location with our equipment and staff. We focus on activities and challenges that can be accomplished with varied groups and settings. Our program will work to reinforce the goals and mission of your group while instilling elements of self-esteem, teamwork, effective leadership, creative problem solving and self-discipline. All activities are conducted on ground level and participants will not be suspended in the air.

##### Programming Equipment includes:

- Hula hoops
- Ropes
- Poly dots
- Throwables (stuffed animals and soft foam balls)
- Swimming pool noodles
- Bandanas (blind-folding)

##### Waiver of Liability

*In consideration of being permitted to participate in any program or activity offered by the City and County of Denver's Department of Parks and Recreation (DPR), I do hereby, for myself, my heirs, and administrators, waive and release any and all claims I may have against the City and County of Denver, its employees, various sponsoring agencies, as well as paid and non-paid volunteers. Although I understand that a physician examination is not required for registration, it is highly advisable that I consult with a physician before participating in athletic and strenuous activities. I have read this form and understand its content and request participating in programs offered by DPR.*

##### Photography Waiver

*I understand that recreation centers and events sponsored by DPR are public and that action or still photographs of me or my family members may be taken for use in promotional materials or in electronic media.*

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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