

Organization Name: **SCENIC RIVER CANOE EXCURSIONS** 



## **Scenic River Canoe Excursions**

## PARTICIPANT RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT \*\*\*READ BEFORE SIGNING\*\*\*

Participant Name (PRINT):		
In consideration of being allowed to participate in any way in the program, rela acknowledge, appreciate, and agree that:	ated events and	d activities, I the undersigned,
<ol> <li>The risk of injury from the activities involved in this program is signift paralysis and death.</li> <li>I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both FROM THE NEGLIGENCE OF THE RELEASERS or others, and participation.</li> <li>I willingly agree to comply with the terms and conditions for the participation, I will remove myself from of the nearest official immediately.</li> <li>I, for myself and on behalf of my heirs, assigns, personal representative INDEMNIFY, AND HOLD HARMLESS SCENIC RIVER CANO agents and/or employees, other participants, sponsors, advertisers, and used to conduct the event (RELEASEES), from any and all claims, derelated to any INJURY, DISABILITY, OR DEATH I may suffer, or WHETHER ARISING FROM THE NEGLIGENCE OF THE RE extent permitted by law.</li> <li>A late fee of \$20.00 per boat per half hour (canoe, kayak, or transport) OF \$600.00 IS ASSIGNED PER DAMAGED OR LOST CANOE per damaged or lost paddle or Life Preserver.</li> <li>I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OUNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDICATE.</li> </ol>	th known and a dassume full in design the full in participation. If I on participation wes and next of the EXCURSI in fapplicable mands, losses loss or damage CLEASEES OF THE COR KAYAK.  FRISK AGR SUBSTANTI	unknown, EVEN IF ARISING responsibility for my observe any unusual significant and bring such to the attention f kin, HEREBY RELEASE, ONS, its officers, officials, owners and lessors of premises, and liability arising out of or e to person or property, OR OTHERWISE, to the fullest fter 7:00p.m. daily. A FEE A fee of \$25.00 is assigned
X Participant's Signature		
Participant's Signature	Age	Today's Date
FOR PARENTS/GUARDIANS OF PARTICIPANT OF MINOR AGE (UNREGISTRATION) This is to certify that I, as parent/guardian with legal responsibility for this part as provided above of all the Releasees, and, for myself, my heirs, assigns, and and hold harmless the Releasees from any and all liability incidents to my mino programs as provided above, EVEN IF ARISING FROM THE NEGLIGEN extent permitted by law.	icipant, do con next of kin, I r or child's invo	nsent and agree to his/her release elease and agree to indemnify lvement or participation in these
X	Date	Emergency Phone Number(s)
		Emergency Phone Number(s)
**JOIN OUR TEXT LIST to receive future <b>DISCOUNTS</b> and not CELL PHONE(Optional):		