

## Wildrock Waiver of Liability

(Please Complete One Form for Each Participating Child)

Parent's Name \_\_\_\_\_ Child's Name \_\_\_\_\_

I, as the participant or parent/guardian of the participant, recognize that possible injury, including but not limited to paralysis, death, emotional distress, monetary loss, or other damage to myself, to property, or to third parties can occur in activities that involve periods of physical exertion, balancing, heights, lifting, pushing, pulling, and climbing (hereinafter referred to as the "Program"). I know most activities will be outdoors where I will need to watch for slippery and/or uneven footing, limbs and branches, insects or animals and possibly exposure to extreme inclement weather. Being fully aware of these dangers, I voluntarily consent to myself and/or my child participating in the Program and any and all Wildrock activities and I accept all risks associated with that participation.

I understand that I will not be forced into doing an activity and that despite all reasonable precautions taken, a guarantee of absolute safety is impossible. I agree to exercise good personal judgment, to ask for help if I am concerned about my safety and to be reasonable for deciding if a proposed activity is appropriate for me. I agree to inform staff of any physical, mental, or medical condition that might affect my ability to participate or affect other members of my group. I realize that failure to tell that information could result in serious harm to myself or others. I also state that I am not under, and will not be under the influence of any chemical substance, including alcohol.

In consideration for allowing myself and/or my child to use these facilities and participate in the Program, I, on my own behalf and the behalf of my child and his/her respective heirs, administrators, executors and successors, hereby covenant not to sue and forever release Wildrock, its officers, directors, shareholders, employees, agents and other related parties from the responsibility or liability for any and all claims, demands, losses or damages on account of injury, including but not limited to bodily injury, death, loss of income or damage to property, arising out of participation in the Program or related activities, whether on Wildrock's property or elsewhere. I expressly agree and promise to accept and assume all of the risks existing in these activities as outlined above on behalf of myself and my child.

I understand that this Waiver of Liability includes, but is not limited to, damages which are caused, or alleged to be caused, in whole or in part, by the negligence of Wildrock, its officers, directors, shareholders, employees, agents and other related parties.

**Authorization of Medical Care** - In case of injury or illness during participation, I would like myself and/or my child to receive reasonably appropriate emergency medical care, including hospital care if necessary, and I hold Wildrock and its representatives harmless in their execution of this action. Additionally, I hereby agree to individually provide for all possible medical expenses that may be incurred by myself and/or child as a result of any injury sustained while participating in the Program or other activities at Wildrock.

**Parent Responsibility to Supervise** - When I visit Wildrock, or am involved in any related activity involving parental presence or participation, I understand and accept the responsibility, and any

associated liability, of constantly supervising, controlling, and restricting activities as necessary to assure the safety of myself and any children I bring to Wildrock property.

**Photographs and Statements** - I authorize use of my own and my child's visual image and statements in newsletters, posters, and other advertising.

**Valid Dates** - These agreements, waivers, and authorizations will remain valid and in force as long as and whenever my child, myself, or any family member participates in any activity at the Wildrock property.

**Agreement to Pay** - I understand there are no refunds, credits, or guaranteed make-ups for missed classes due to personal reasons or inclement weather, and I am obligated to pay full tuition once a session begins. I accept the responsibility of paying for any damage to facility and equipment caused by myself or a family member.

**By signing this document, I acknowledge that if anyone is hurt or property is damaged during my or my child's participation in the Program or related activities, I may be found, by a court of law, to have waived my right to maintain a lawsuit against Wildrock on the basis of any claim from which I have released them herein. I have had sufficient opportunity to read and fully understand this entire document and I agree to be legally bound by its terms.**

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Signature of Parent/Guardian	Date	Signature of Participant	Date
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Printed Full Name	Printed Full Name
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