



Mountain Pine Woman's Club Waiver and Release of Liability

Name: _____

Address: _____

Cell Phone: (____) _____

Home Phone: (____) _____

Emergency Contact: _____

Emergency Contact Relationship: _____

Emergency Contact Phone: (____) _____

Waiver and release of liability

I understand that the activities, services, trips, and events offered by the **Mountain Pine Woman's Club, MPWC**, may have an element of hazard or inherent danger, and further may be an extreme test of a person's physical and mental abilities. I understand that my participation in such activities, services, trips, and events can cause serious injury, potential death, and property damage. I understand participating in activities and trips while in a wheelchair or walker may present special hazards, inherent danger, and be an extreme test of physical abilities. On behalf of myself, my executors, administrators, heirs, next of kin, successors and assigns, I hereby waive, release, and discharge the **MPWC**, its officers, directors, employees, and volunteers from any and all claims, liabilities, losses, costs, or expenses, for death, personal injury, or damages of any kind that I may incur while participating in **MPWC** activities, services, trips and events, whether such losses, damages or injuries are a result of negligence of **MPWC**, its officers, directors, employees, and volunteers except for loss, damage, or injury which is the result of gross negligence and/or wanton misconduct of **MPWC**, its officers, directors, employees, and volunteers. I agree to indemnify and hold harmless **MPWC**, its officers, directors, employees, and volunteers from any claims made or liabilities assessed against them as a result of my actions, or any action taken on my behalf. In consideration of the rights and privileges granted to me by my involvement with the **MPWC**, I certify that I have read and understand this **WAIVER AND RELEASE OF LIABILITY** and, by checking the box below, hereby acknowledge that I am signing voluntarily. I also understand and agree that my photograph may be taken while participating in **MPWC** activities, services, trips and events and such photograph may be used in publications and for promotional purposes and I will not be compensated.

I agree to the Waiver and Release of Liability.

Signature: _____ Date: _____

Print name: _____