

Riverton Mineral and Gem Society, Inc.

INFORMED CONSENT/ASSUMPTION OF RISK/WAIVER OF LIABILITY

Trip Host: _____

Trip Date(s): _____

Trip Location(s): _____

Please read the following information before beginning the field trip or activity. Sign and date the accompanying sign-in sheet to acknowledge that you have read and understand the information presented below.

I understand that the field trip/activity that I am participating in, of the above named Society, may include one or more of the following hazard(s) that may result in personal harm:

Unpredictable and Dangerous Environmental Conditions/Hazards, including but not limited to, snow, rain, wind, very cold and very hot temperatures, lightning, altitude, loose rock, falling rock, rock slides, avalanches, river hazards, mud slides, mud, ice, other slippery conditions and contact with poisonous reptiles, wild fauna and toxic plants.

I understand the risks inherent in all outdoor activities (including high altitude activities) existing in the environment, either natural or man-made.

I understand that I am required to use appropriate safety equipment pertinent to the field trip activity in which I will be participating. I accept full responsibility for my actions and accept liability for any resulting damages or injuries.

By participating, I am assuming the risks inherent in this field trip or activity and I am releasing the above named societies, their officers, directors and individual members, from any liability for claims or lawsuits by the undersigned participant, arising out of this field trip activity. By signing this waiver of liability I understand that I release all property owners (private land owners and mining claimants) and lessees of any liability or responsibility for any accidents, injuries, problems or any other unfortunate incidents that may occur during this activity on their property. I have read all of the aforementioned information and understand any and all of it. Any questions, which have occurred to me, have been answered to my satisfaction. I am participating in these activities of my own free choice.

If I am unable to clearly communicate in any way, or a minor child for whom I am giving consent is involved, I authorize the trip leader to consent on my part to any emergency medical procedure deemed necessary by a treating physician.

If the participant is under 18 years of age, this form must be read and signed by a parent or legal guardian before participating in this field trip or activity.

INFORMED CONSENT/ASSUMPTION OF RISK/WAIVER OF LIABILITY SIGN-IN SHEET

Trip Location(s): _____ Trip Date(s): _____

“I hereby acknowledge that I have read and understand the information provided in the RMGS Informed Consent/Assumption of Risk/Waiver of Liability Form.”

******* All participants must sign below and comply with all field trip requirements. *******

Signature: _____ Cell # : _____ RMGS Member

(* Indicate minor’s & guardian’s name as one entry)

1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____
5	_____	_____	_____
6	_____	_____	_____
7	_____	_____	_____
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25	_____	_____	_____