

PARTICIPANT'S REQUEST AND RELEASE

I, the undersigned, on behalf of myself and _____

(collectively, "Other Participants"), hereby request permission to enter the property of The Cobb Land Trust Inc. ("Cobb Land Trust") located off of Paper Mill Road in Cobb County, Georgia and known as the McFarlane Nature Park (the "Park"), and to participate in _____ to be held during _____. I have inspected the Park, and I know the risks and dangers involved in such stated activities and that unanticipated and unexpected dangers may arise during such activities. I assume all risks of injury to my person and property and to the persons and property of the Other Participants that may be sustained in connection with our activities at the Park.

In consideration of the permission granted to me to enter the Park and to participate in the stated activities, I, for myself, my heirs, administrators, executors, successors, and assigns, and for the Other Participants and their heirs, administrators, executors, successors and assigns, hereby release, remise and discharge Cobb Land Trust and all other owners, operators, and sponsors of the Park and/or activities, and their respective servants, managers, employees, agents, officers and officials (collectively, the "Released Parties"), from all claims, demands, actions, and causes of action of any sort, including, but not limited to, injury sustained to my or any of the Other Participants' persons and/or property, arising out of or relating to our presence in the Park and/or our participation in the stated activities, whether due to any acts or omissions of active or passive negligence or any other fault. I do further agree that I will be solely responsible for the persons and property of the Other Participants, and I do hereby indemnify and hold harmless the Released Parties from and against any and all claims, demands, damages, liabilities causes of action and expenses that may be suffered or incurred by any of the Released Parties arising out of or relating to our presence in the Park and/or our participation in the stated activities.

I represent and certify that I am eighteen (18) years of age or older. I represent and certify that I have the permission of all parents and/or guardians of all Other Participants who are under the age of eighteen (18) years to participate in the stated activities, and that such parents and/or guardians have full knowledge thereof.

I certify that our attendance at and participation in the stated activities is voluntary, and that we are not, in any way, employees, servants or agents of Cobb Land Trust or of any other owners, operators or sponsors of the Park and the activities thereon.

I HAVE READ AND UNDERSTAND THE FOREGOING REQUEST AND RELEASE.

In witness whereof, I have executed this release on _____, 20____.

Printed Name of Participant

Signature of Participant

Please mail to:

The Cobb Land Trust Inc.
P.O. Box 672652
Marietta, Georgia 30006

may be returned electronically