

Lost Woods of Ainotaria

General Liability Waiver and Release

BY SIGNING THIS DOCUMENT YOU WILL WAIVE CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE OR CLAIM COMPENSATION FOLLOWING AN ACCIDENT OR INJURY PLEASE READ CAREFULLY!

By signing below, I acknowledge that I am at least eighteen (18) years old, have read this waiver in its entirety, and have agreed to its terms.

- I understand and acknowledge that my participation in Lost Woods of Ainotaria (hereinafter referred to as “the LARP”) is an inherently dangerous activity and that, given the nature of the LARP, the risk of injury, serious injury, or death cannot be eliminated.
- This document shall remain in effect for the period of one year from the date of signing.
- I am aware that participating in the LARP involves several risks, potential dangers, and hazards. These include, but are not limited to:
 1. extensive hiking on rough and uneven terrain
 2. changing weather conditions including but not limited to precipitation, cold, heat, humidity, and wind as well as the subsequent potential for more dangerous travel and living conditions
 3. limited visibility around obstacles and overhead objects
 4. slips, trips, and falls
 5. illness, infection, and over-exertion
 6. contact with other participants, LARP staff, volunteers, property owners, and spectators
 7. loud noises
 8. premises defects
 9. exposure to fire and the associated dangers
 10. emotionally intense and potentially triggering events
- I understand and acknowledge that all applicable rules for participation in the LARP, and all directions and instructions given by the LARP staff and volunteers must be followed and that sole responsibility for my personal safety remains with me at all times while participating in the LARP.
- I understand that the use of controlled substances or operating under the influence of controlled substances is against the rules of the LARP. I accept full responsibility for any injuries I may incur and damages I may cause as a result of the use of controlled substances or participation in illegal activities.

- I certify that I am sufficiently physically fit and have no medical condition that would make my participation in the LARP too hazardous to participate.
- I agree to remove myself from participation in the LARP should I detect or observe any hazardous or unsafe condition, or feel unfit or unable to safely continue.
- I understand that any items I bring with me to the LARP are solely my responsibility and will not hold the LARP coordinators, staff, property owners, and volunteers in any way responsible should they be damaged, lost, or stolen.
- I - consent - do not consent - (circle one) to the use of my image in photographs, motion pictures, or recordings taken at the LARP, for use in advertising, marketing or promotion. I am aware that refusing consent means that my picture may still be taken, but the image will be edited to remove any distinguishing features, such as with facial blurring, etc. before the image is used.
- By signing this waiver, I agree to release, hold harmless, and wave all claims that I have or may have in the future against Lost Woods of Ainotaria, its coordinators, employees, property owners, volunteers, venue, sponsors, contractors, spectators, and assigns (hereinafter collectively referred to as “the released”) for all loss, damage, injury or expense which I may suffer as a result of my participation or presence at the LARP due to any cause whatsoever. These causes are including but not limited to negligence, gross negligence, or negligent rescue on the part of the released and from any breach of contract, statutory duty, or duty of care on the part of the released. I agree not to seek any form of compensation and hold harmless the released from all claims, expenses, fees, liability, damage award, or cost of any type however arising from my participation in the LARP. I have carefully read and understood this waiver and release and am aware that by signing this document, I am waiving substantial legal rights on my own behalf, and on behalf of my estate, heirs, executors, and next of kin, including giving up the right to sue.

Legal Name: _____

Emergency Contact Name and Number: _____

Signature: _____ Date: _____