



Educate, Explore, Protect

Liability Waiver: I agree to release and not to sue ADK for any personal injury, property damage, illness, including COVID or other respiratory illness, mental or emotional trauma, paralysis, disability, or death to myself or others as a result of any alleged negligence of ADK or other participants that is in any way connected with my or my child's participation in this activity(ies) or my or my child's use of ADK equipment, facilities, or premises. I understand and agree to waive all claim/s I or my child may have against ADK and agree that neither I, my child, nor anyone acting on my or my child's behalf will make a claim against ADK or the Cold River Chapter.

Photo Opt Out Option: I understand that I give ADK and the Cold River Chapter (CRC) permission to use any photo of me or my child in promotional publications including, but not limited to, the ADK and Chapter websites and newsletters. I understand by checking the Photo Opt Out box that any photos of me will not be used in promotional materials. I also agree to allow the CRC to take group photos without me to use in CRC and ADK media.

Participant Information:

	Print Full Name	Signature	Email	Emergency Phone	Emergency Contact	ADK Member Yes or No	Photo Opt Out
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If under 18 years of age, Parent or Guardian must read and sign below:

Participant and parent/s of a minor participant agree: I have carefully read, understand, and voluntarily sign this document and acknowledge that it shall be effective and binding upon me, my minor children, and other family members, my heirs, executors, representatives, and estate to the greatest extent permitted by law. I further acknowledge that the substantive laws of the State of New York govern this document and that if any portion of this document is deemed unlawful or unenforceable, it shall not affect the remaining provisions, which shall continue in full force and effect.