

INFORMED CONSENT/ASSUMPTION OF RISK/WAIVER OF LIABILITY (for ACTIVITIES & FIELD TRIPS)

HI DESERT GOLD DIGGERS INC. **PO Box 552** Apple Valley, CA 92307

Please read the following information before beginning the field trip or activity. Sign and date this form to acknowledge that you have read and understand the information presented below.

	ld trip/activity that I am participating in, of the above-named society, may include one hazard(s) that may result in personal harm:
wind, very hot and/or ve	erous Environmental Conditions/Hazards, including but not limited to: snow, rain, ery cold temperatures, lightening, altitude, loose rock, falling rock, rock slides, s, mud slides, mud, ice, slippery conditions, and contact with poisonous reptiles, wild (Initial)
	herent in all outdoor activities (including high altitude activities) existing in the ural or man-made (Initial)
	equired to use appropriate safety equipment pertinent to the field trip or activity in sing. I accept full responsibility for any actions and accept liability for any resulting (Initial)
named society, their offi by the undersigned parti activity. By signing this v and mining claimants) ar	suming the risks inherent in this field trip or activity and I am releasing the above- icers, directors and other individuals members, from any liability for claims or lawsuits icipant (and their family members, heirs or assignees) arising out of this field trip or waiver of liability, I understand that I release all property owners (private land owners and lessees of any liability or responsibility for any accidents, injuries, problems or other lat may occur during this field trip or activity on their property(Initial)
	rementioned information and understand any and all of it. Any questions, which have ve asked, have been answered to my satisfaction. I am participating in these activities(Initial)
If the participant is undo before participating in t	er 18 years of age, this form must be read and signed by a parent or legal guardian his field trip or activity.
	PLEASE PRINT LEGIBLY below:
MEMBER NAME:	
MEMBER ADDRESS:	
SIGNATURE:	DATE: