HIKING RELEASE OF LIABILITY, WAIVER OF CLAIMS, EXPRESS ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

Please read and be certain you understand the implications of signing

Express Assumption of Risk Associated with Hiking and Related Activities	
I,do hereby affirm and ac	knowledge that I have been fully informed of the inheren
hazards and risks associated with hiking, transportation of equipment related to the acti	ivities, and traveling to and from activity sites, in which I are
about to engage. Inherent hazards and risks include but are not limited to:	
1. Risk of injury from the activity and equipment utilized is significant including the po	otential for permanent disability and death.
2. Falling, causing broken bones severe injuries to the head, neck and back which may	result in severe impairment or even death.
3. All "act of nature," including but not limited to avalanche, rock fall, inclement weath	ner, thunder and lighting, severe and or varied wind,
temperature and other weather conditions.	
4. Risks associated with crossing, climbing or down-climbing of rock, snow and/or ice.	
5. Risks associated with river crossings, fordings, or portaging.	
6. Possible equipment failure and/or malfunction of my own or others' equipment, whic 7. My own negligence and/or the negligence of others, including employees, agents, ag	th may have been rented, borrowed, or personally owned. dependent contractors or representatives of
including but not limited to operator failure.	
 Cold weather and heat related injuries and illness including but not limited to frostni hypothermia and dehydration. 	ip, frost bite, heat exhaustion, heat stroke, sunburn,
9. Attack by or encounter with insects, reptiles, and/or animals.	
10. Accidents or illness occurring in remote places where there are no available medica	
11. Fatigue chill, and/or dizziness, which may diminish my/our reaction time and increase	ase the risk of accident
12. My sense of balance, physical coordination, and ability to follow instructions.	
*I understand the description of these risks is not complete and that unknown or u	unanticipated risks may result in Injury, illness, or death
Release of Liability, Waiver of Claims and Indemnity Agreement	
In consideration for being permitted to participate in any way in hiking and related activities, I hereby agree, acknowledge and appreciate that:	
1. I HEREBY RELEASE AND HOLD HARMLESS WITH RESPECT TO ANY AND ALL INJURY, DISABIUTY, DEATH, or loss or damage	
person or property, WHETHER CAUSED BY NEGLIGENCE OR OTHERWISE, the	
releasees.	
Owner (Company and/or Person) 2. To release the releasees, their officers, directors, employees, representatives, agents, and for any claims or causes of action that I, my estate, heirs, survivors, executors, or wrongful death arising from the above activities whether caused by active or passive document, I agree to hold the releasees harmless and irl demnify them in conjunction with property that may occur as a result of engaging in the above activities.	or assigns may have for personal injury, property damage, of negligence of the releasees or otherwise. By executing this
3. By entering into this Agreement, I am not relying on any oral or written representation	on or statements made by the releasees, other than what is se
forth in this Agreement.	
This release shall be binding to the fullest extent permitted by law. If any provision of the	this release is found to be unenforceable, the remaining term
shall be enforceable.	
I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RIS	SK AGREEMENT, AND I FULLY UNDERSTAND ITS
TERMS, AND UNDERSTAND THAT I HAVE GIVEN UP LEGAL RIGHTS	
VOLUNTARILY WITHOUT ANY INDUCEMENT.	
Signature of Adult Participant	Name of Adult Participant (Please Print)
Date	Date
Dute	Date
FOR PARTICIPANTS OF MINORITY AGE: This is to certify that I, as Parent, Guardian, Tempor	rary Guardian with legal responsibility for this participant, do consen
and agree not only to his/her release of all Releasees, but also to release and indemnify the Releasees	es from any and all liabilities incident to his/her involvement in thes
programs for myself, my heirs, assigns, and next of kin.	
Signature of Parent or adult legal Guardian	Name of Parent or adult legal Guardian
if Participant is a Minor, and by their signature,	

Date

they on my behalf release all claims that both