



RACHEL CARSON TRAILS CONSERVANCY

LIABILITY RELEASE

Activity _____

Location _____

Date _____

In consideration of your acceptance of my application for participation in the activity listed on this form, I, the undersigned, for myself, my heirs, executors, administrators and assigns, waive and release any and all claims for damages, for death, personal injury or loss of property I may have, or which may accrue to me as a result of my participation. I, the undersigned, discharge and release the Rachel Carson Trails Conservancy, its activity leaders, and their respective agents, boards, commissions, and any other involved employees and representatives from all liability arising out of or connected in any way with my participation in this activity, whether or not caused by the negligence of any of the above parties.

I acknowledge that there are inherent risks and dangers which may arise at any time during this activity. My participation is voluntary and is done at my own risk. I voluntarily assume all risks of loss, damage or injury that may be sustained while participating in this event. I attest that I am physically fit and sufficiently trained for this activity. I understand and agree that medical or other services rendered to me by or at the insistence of any of the above parties is not an admission of liability to provide or to continue to provide any such service and is not a waiver by any of said parties of any right hereunder. I understand that serious accidents occasionally occur during the named activity and that participants in this event may sustain mortal or serious injury as a consequence thereof. Nevertheless, I agree to assume these risks and to release and indemnify and hold harmless all the persons and entities mentioned above who might otherwise be liable to me (or my heirs or assigns) for damages, of whatsoever kind or nature.

I attest that the equipment and clothing I will use in this activity is in good condition. I UNDERSTAND THAT PROPER EQUIPMENT IN GOOD CONDITION CAN PREVENT SERIOUS INJURY. I agree to abide by the rules of conduct as established by the Rachel Carson Trails Conservancy and to obey the directions of the activity leader and other officials. I hereby grant full permission to the activity leaders, the Rachel Carson Trails Conservancy and their respective agents, boards, commissions, and any other involved parties of the foregoing to use photographs, videotapes, motion pictures, or any other record of this event, including my name, likeness and/or voice for any legitimate purpose.

I have read and understand everything written above, and I voluntarily sign this agreement.

Print Name	Signature	Home Phone	Emergency Phone	Email Address
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