Screamin' Eagle Outfitters Recreation Release Form

Participant				1 01 111		
Address						
City		State	Zip			
Date of Birth	//	Ph	one			
I. the	undersianed, want to	participate in	the recreation and (all other activi	ties offered by Screamin' Eagle	
	_	•			en the opportunity to engage in these	
activities.						
I understand	that:					
(1)	The activities can be physically and mentally intense and may require extreme exertion to participate in and that the possibility of injury to others and myself exist.					
(2)	The activities can be dangerous if not played in accordance with stated rules which I will have been made aware of, understand and will abide by.					
(3)	Screamin' Eagle Outfitters will not be responsible in any way for accidental insurance and that it is the full responsibility of the participant and their party to cover any medical needs that may arise.					
I confirm and	•		. ,	•	•	
(1)	(1) I am fully aware of the risk and I fully assume the risk that I am physically and mentally able to be ful involved in these activities and will comply with all rules, regulations and the full and complete use of al					
	equipment so as not to injure or hurt myself or other participants.					
			Release			
any and all claims with, or resulting possession use, or that this release I am in good heal any of the recrea	, actions, suits, procedures from participating in any of operation of such equipments shall be binding upon my eat th and do not suffer from ution and or activities of ar ato Screamin' Eagle Outfit	s, costs, expenses of the recreation ent. I hereby rel state, my heirs, m a heart condition ny kind offered by ters all rights to	(including attorney's fees including, without limitat ease the sponsors and pro by representatives and ass or other ailment which co of Screamin' Eagle Outfitte use any photographs or vi	and expenses), do on, these resulting perty owners from igns. I hereby cer uld be exacerbate ers. deo of me taken re	uners, indemnifying and releasing them against images and liabilities arising out of, connected of from the manufacture, selection, delivery, a any and all such liability, and I understand rify to the sponsors and property owners that d by the exertion involved in participating in elative to participation in any and all activities.	
I confirm t			•		ny injuries that I may sustain or cause. Dund by this agreement.	
Signature of ad	lult camper/staffer	· 		Date/_	/	
I confirm that	I have read the above				ge to cover any injuries, but will accept al	
	I state that <u>I am at</u>	•	bilities that I may sust <u>of age</u> and in good heal		ound by this agreement.	
Signature of ad	lult camper/staffer:				Date//	
	Comple	ete this secti	on (only) if you are	less than 18	vears old	
below. Parent Agreeme	<u>r 18, please have this ac</u> ent: My signature below er this agreement.	greement guara indicates that	nteed by having your po I agree to be bound by	rent, guardian, o	or responsible person over age 21 sign I assumption of risk for the participant	
	n name (please print)				This is fully intended to be a legally	
					binding contract. If I have any doubts concerning any aspect of its	
City		s	tateZip_		contents, I will consult an attorney before signing it.	
Relationship to participant					Rev. 4-15-17	