

Participant Waiver Form

- 2. I acknowledge that this TREK may involve a test of my physical limits and carries with it the potential for property loss, serious injury including loss of limb, or death and that the cause of these risks may include, but are not limited to, terrain, facilities, weather, vehicular traffic, poor hydration, actions of other people including, but not limited to, participants, volunteers, spectators and TREK monitors.
- 3. I attest that I am physically fit enough to participate in the TREK and am aware that participation in the TREK could in some circumstances, result in physical soreness and / or injury. I understand that I am solely responsible for my health and safety and that the trail, which I will be walking on, will be unsupervised for the most part.
- 4. I understand that I need to pay careful attention to my surroundings and if I chose to use devices or do other things which may have the tendency to distract me, I accept the consequent risks associated.
- 5. I recognize that various photographs, video recordings, and other media will be captured during the TREK. I agree to grant the Hosts full permission to use any photographs, video recordings or other media of the TREK that contain my likeness for any purpose deemed appropriate by the Host.
- 6. I acknowledge that this waiver and release is the entire Agreement between the Hosts and me, and that this Agreement cannot be modified or changed in any way by representations or statements of the Host or by me.
- 7. I acknowledge that this waiver and release of rights contains no expiration date.

I HEREBY DECLARE THAT I HAVE READ AND FULLY UNDERSTAND THIS AGREEMENT IN ITS ENTIRETY AND THAT BY SIGNING BELOW, I ASSENT TO ALL OF THE TERMS AND CONDITIONS CONTAINED IN THE AGREEMENT.

PARTICIPANT	
Signature	Name:
Address:	