



PARTICIPANT RELEASE OF LIABILITY WAIVER

2025

In consideration of being allowed to participate in any way in this sports activity, related events and activities, the undersigned acknowledges, appreciates, and agrees that: The risk of injury or illness from the activities involved in this sport is significant, including the potential for permanent paralysis and death; and while particular safety rules, equipment, and personal discipline may reduce this risk, the risk of serious injury or illness does exist;

I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEE'S or others and assume full responsibility for my participation; and, I willingly agree to comply with the stated and customary terms and conditions for participation.

If I observe any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such hazard to the attention of the nearest group leader/coach immediately; and, I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS INLAND NW and MT CANOE CLUB, SILVER LINING FOUNDATION; JIM and JOYCE MOERKERKE; it's insurers; their officers & directors, officials, agents, and/or employees, other p participants, sponsoring agencies, commissions, sponsors, advertisers, volunteers, coaches, steerers, and, if applicable, owners and lessors of premises or equipment used to conduct club activities or club only events ("RELEASEE'S"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEE'S OR OTHERWISE.

I also acknowledge that photographs and video may be taken of me in my participation in, and attendance during club organized activity, and hereby freely agree to allow without restriction all uses of such photos and videos in the reporting, and/or in the promotion of this club, its location, other sporting events, sport in general, and/or related purposes.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

PLEASE COMPLETE ALL SECTIONS

| (Participant/Member Name: PLEASE PRINT) | | |
|---|--|---|
| Signature: | Phone: | Date: |
| Email Address: | | |
| PARTICIPANTS OF MINOR AGE (UNDER AGE 18 | AT THE TIME OF RE | GISTRATION) This is to certify that L as |
| parent/legal guardian with legal responsibility for this parti- the Releasee's, and, for myself, my heirs, assigns, and next of from any and all liabilities incident to my minor child's invo ARISING FROM THE NEGLIGENCE OF THE RELEA | cipant, do consent and agree of kin, I release and agree to lvement or participation in | e to his/her release as provided above, of all indemnify and hold harmless the Releasee's these programs as provided above, EVEN IF |
| PARTICIPANTS OF MINOR AGE (UNDER AGE 18 parent/legal guardian with legal responsibility for this parti- the Releasee's, and, for myself, my heirs, assigns, and next of from any and all liabilities incident to my minor child's invo ARISING FROM THE NEGLIGENCE OF THE RELEA photographic and video release set forth above. Parent/Legal Guardian Name & Address: (PLEASE PRINT | cipant, do consent and agree of kin, I release and agree to lvement or participation in ASEE'S, to the fullest exte | te to his/her release as provided above, of all indemnify and hold harmless the Releasee's these programs as provided above, EVEN IF nt permitted by law. I further agree to the |

Signature of Parent/Legal Guardian: ____

Date: