ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM

Activity or Event (Please Select One): ☐ Scientific Field Trip (Indicate Trip Numb ☐ Child Care Services	per)	☐ Fun Run/Fun V	
I HEREBY ASSUME ALL OF THE RISKS ACTIVITY OR EVENT, including by way of carelessness on the part of the persons or ent owned, maintained, or controlled by them or	of example and no ities being releas	ot limitation, any risks that m ed, from dangerous or defect	ay arise from negligence or ive equipment or property
I certify that I am physically fit, have sufficient been advised to not participate by a quality or problems which preclude my participation	fied medical pro	fessional. I certify that there a	
I acknowledge that this Accident Waiver and sponsors, and organizers of the activity or every responsibilities at said activity or event.			
In consideration of my application and perm noted below for myself, my executors, admir ENTITIES OR PERSONS: the Ecological S volunteers, representatives, and agents, the a volunteers.	nistrators, heirs, rociety of Americ	next of kin, successors, and as a, Inc., (ESA) and/or their dir	ssigns vis-à-vis the following rectors, officers, employees,
(A) I WAIVE, RELEASE, AND DISCHA liability, including but not limited to, liabi for my death, disability, personal injury, p hereafter occur to me including my traveli	lity arising from toperty damage,	the negligence or fault of the property theft, or actions of a	entities or persons released,
(B) I INDEMNIFY, HOLD HARMLESS, paragraph from any and all liabilities or cleaused by the negligence of release or other	aims made as a re		
I acknowledge that ESA and their directors, errors, omissions, acts, or failures to act of a			
I acknowledge that this activity or event may the potential for death, serious injury, and pr terrain, facilities, temperature, weather, wild people including, but not limited to, participa and/or producers of the event, and lack of hy present for volunteers.	operty loss. The life, condition of ants, volunteers,	risks include, but are not limi participants, equipment, vehi spectators, coaches, event off	ted to, those caused by icular traffic, actions of other icials, and event monitors,
I hereby consent to receive medical treatment illness during this activity or event.	t which may be o	leemed advisable in the even	t of injury, accident, and/or
I understand that at this or related activities of likeness to be used for any legitimate purpos assigns.			
The Accident Waiver and Release of Liabilit maximum extent permissible under applicab	•	ued broadly to provide a relea	ase and waiver to the
I CERTIFY THAT I HAVE READ THIS DEAWARE THAT THIS IS A RELEASE OF I			
Signature (if under 18 years old, Parent or Guardian must also sign)		ticipant's Name ease print legibly)	Date

PARENT / GUARDIAN WAIVER FOR MINORS (Under 18 years old)

The undersigned parent or natural g	uardian does hereby	represent that he/she is, in fact, acting in su	ich capacity, has	
consented to his/her child or ward's	participation in the	activity or event, and has agreed individual	ly and on behalf of	
the child or ward, to the terms of the	e Accident Waiver ar	nd Release of Liability set forth above. The	undersigned paren	t
or guardian further agrees to save ar	nd hold harmless and	indemnify each and all of the parties refer	red to above from a	11
liability, loss, cost, claim, or damage	e whatsoever which	may be imposed upon said parties because	of any defect in or	
lack of such capacity to so act and r	elease said parties or	n behalf of the minor and the parents or lega	al guardian.	
Print Participant's Name	Age	Signature of Parent or Guardian	Date	