



Friends of the North Fork and White Rivers Volunteer Liability Waiver Form

In consideration of my participation in the Friends of the North Fork and White Rivers, (FNFWR) Crooked Creek float, cleanup and festivities (Event), I agree to the following Waiver and Release:

I acknowledge that Event has inherent risks, hazards, and dangers that cannot be eliminated. I UNDERSTAND THAT THESE RISKS, HAZARDS, AND DANGERS INCLUDE WITHOUT LIMITATION INCLUDING ILLNESS, INJURIES. PARALYSIS AND DEATH.

I understand that this Event may require good physical conditioning and a degree of skill and knowledge. I believe I have that good physical conditioning and the degree of skill and knowledge necessary for me to engage in the Event safely. I AM VOLUNTARILY PARTICIPATING WITH FULL KNOWLEDGE OF THE INHERENT RISKS, HAZARDS, AND DANGERS INVOLVED AND HEREBY ASSUME AND ACCEPT ANY AND ALL RISKS.

I, for myself, my heirs, successors, executors, and subrogates, hereby KNOWINGLY AND INTENTIONALLY WAIVE AND RELEASE, INDEMNIFY AND HOLD FNFWR HARMLESS, its directors, officers, sponsors and volunteers from and against all claims, actions, causes of action, liabilities, suits, expenses (including reasonable attorneys' fees) which are related to, arise out of or are in any way connected with my participation in the Event including, but not limited to negligence of any kind or nature whether foreseen or unforeseen, arising directly or indirectly out of any damage, loss, illness, injury, paralysis, or death to me or my property as a result of my engaging in the Event.

I, for myself, my heirs, my successors, executors, and subrogates, further agree not to sue FNFWR, its directors, officers, sponsors or volunteers as a result of any damage, loss, illness, injury, paralysis, or death suffered in connection with my participation in the Event.

I HAVE CAREFULLY READ, CLEARLY UNDERSTAND, AND VOLUNTARILY CHOOSE TO SIGN THIS WAIVER AND RELEASE AGREEMENT.

Signed and Dated by:

Full Name: _____

Phone: _____

Emergency
Contact: _____

Phone: _____

Signature of Volunteer: _____ Date: _____