

Central New York Kayakers Waiver and Release Form

WAIVER AND RELEASE OF ALL LIABILITY CLAIMS & ACCEPTANCE OF INHERENT RISKS

WARNING: By signing this document, you give up the right to sue. All individuals who participate in any Central New York Kayakers activities must first read and sign this waiver. Once signed, this waiver will be in effect for all activities for the year 2014.

In consideration of my being permitted to participate in Central New York Kayakers activities, I agree to this release of claims, waiver of liability and assumption of risks.

I hereby waive any and all claims I may have against the Central New York Kayakers and release from all liability, and agree not to sue any Central New York Kayakers participants and associated volunteers for any or all personal injury, death, property damage or loss sustained by me or my family as a result of my participation in any of the group's recreational activities (including traveling to and from such activities) and due to any cause whatsoever, including, without limitation, negligence on the part of the participants and associated volunteers. I also agree to the following:

1. I acknowledge and fully understand that I will be engaging in activities that involve risk of damage to personal property or serious injury, including permanent disability and death, and severe social and economic losses which might result not only from my own actions, inactions or negligence, but the actions, inactions or negligence of others, the condition of the premises, or of any equipment used. Further, there may be other risks not known or not reasonably foreseeable at this time.

2. I assume all the foregoing risks and accept full personal responsibility for all expenses, medical or otherwise, following any such damages, injury, permanent disability or death.

I HAVE READ THE ABOVE WAIVER AND RELEASE AND UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND I HAVE SIGNED IT VOLUNTARILY.

I am signing this release with the understanding that it is binding against myself and my heirs, executors, administrators, and all others who may act on my behalf. I confirm that I have read and understood this Agreement.

Signed this _____ day of _____, 20_____ in the presence of:

Participant's Signature

Witness' Signature

Print Full Name

Emergency Contact Name

Print Address

Emergency Contact Phone Number

E-Mail Address