



Muskegon River Sturgeon
Fun Paddle
Muskegon River Watershed Assembly



Waiver and Release of Liability
READ BEFORE SIGNING

Date of event: September 23, 2017

In consideration of being allowed to participate in any way in the Muskegon River Voyage of Discovery Fun Paddle trip, the undersigned acknowledges, appreciates, and agrees that:

The risk of injury from the activities involved in this program is significant, including potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist: and, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, BOTH KNOWN AND UNKNOWN, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES 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, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and, I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS THE MUSKEGON RIVER WATERSHED ASSEMBLY; its officers, agents, and/or employees, and other participants, municipalities, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessees of premises used to conduct the event activities ("RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, OR LOSS OR DAMAGE TO PERSON OR PROPERTY, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

I also authorize the MRWA to use any photos or video clips taken of me during the trip, to be published in publications or provided in presentations to the public.

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.

Participant Name (please print)

Participant's Signature

Emergency Name and Phone Number

Date

Please note any medical conditions or medicines: _____

Please bring the signed form with you on September 23, 2017 and give it to the MRWA Director or Board Member.

FOR PARTICIPANTS OF MINORITY AGE (UNDER 18 AT TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above, of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in this event as provided above, EVEN ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

Parent/Guardian Name (please print)

Parent/Guardian Signature

Emergency Name and Phone Number

Date