

Waiver Form
Acknowledgement, Assumption of Risks, and Release of Claims

Name of Participant: _____

There are significant elements of risk in any adventure, sports or activity associated with the indoor or outdoor use of games and activities incidental thereto (referred to as "activity"). Although we have taken reasonable steps to provide you with the appropriate equipment and/or skilled staff, this activity is not without risk. Certain risks cannot be eliminated without destroying the unique character of the activity. For your safety, and that of the other participants, we think it is important for you to know in advance what is to be expected and to be informed of the inherent risks. I further understand and agree to comply with the following rules:

I acknowledge that the following describes some **BUT NOT ALL** of those risks: risks of personal injury, accidents and/or illness including sprains, torn muscles and/or ligaments, fractured or broken bones, eye damage, cuts, wounds, scrapes, abrasions and/or contusions, dehydration, oxygen shortage (anoxia), and/or exposure, head, neck, and/or spine injuries, allergic reaction, shock, paralysis or death. I/we understand the description of these risks is not complete and the unknown or unanticipated may occur in these activities. I/we elect to participate in spite of the risks.

My/our participant in these activities is purely voluntary. No one is forcing me/us to participate. I/we verify that I/we are physically fit, not under the influence of alcohol or drugs at this time, and sufficiently qualify and trained capable to participate in these activities. I/we elect to participate in spite of the risks. In consideration of services or property provided. I for myself/my employees, and/or minor children for which I am parent, legal guardian, group leader, or otherwise responsible, any heirs, personal representatives or assigns, agree that the Village of Springville, its principles, directors, officers, agents, employees and volunteers, their insurers and each and every land owner, property owner, municipal and/or governmental agency upon those property and activity is conducted and their insures, if any, shall have no liability for its sole negligence.

I also understand that this release relates to all claims and liability resulting from unforeseen hazards. I/we hereby authorize any medical treatment deemed necessary in the event if any injury while participating in the activity.

I have read this entire "acknowledgement and assumption of risk and release of claims" and fully understand the contents. My signature indicates that I have satisfied my questions and concerns.

I understand that this release is a contract. I expressly state that I have read, understand and am familiar with all its provisions and that I sign it of my own free will ; _____ (Initial)

Participant's Signature _____ Date _____
Participants Printed Name _____

TO BE READ AND SIGNED BY PARENT/GUARDIAN OF MINOR

I hereby state that I am the parent or guardian of the minor whose signature appears above. I am familiar with this consent and agree to the term and provisions set forth in this release.

Signature of Parent/Guardian _____ Date _____

The safety and well being of each participant is of paramount importance to the professional staff and employees of the Village of Springville. All reasonable care and precautions are taken to ensure an enjoyable and enriching experience. The following "acknowledgment and assumption of risk and release of claims" is both a requirement of insurance coverage and an important reminder to you as a parent / guardian or participant to be sure that you or your child is properly prepared.