FAMILIES TOGETHER IN NATURE GROUP WAIVER & RELEASE

EVENT: EVENT DATE: EVENT LOCATION:	
injury, death or dama	, I assume any risk, and take full responsibility and waive any claims of personal ge to personal property associated with
I understand and confirm that by signing this Waiver and Release I have given up considerable future legal rights. I have signed this Waiver and Release freely, voluntarily, under no duress. My signature is proof of my intention to execute a complete and unconditional WAIVER AND RELEASE of all liability to the full extent of the law. I am 18 years of age or older and mentally competent to enter into this waiver.	
I am an adult Par	
SIGNATURE _	or guardian of a Participant under the age of 18.
NAME _	
ADDRESS _	
DATE	