PLUM ISLAND KAYAK

Activity Release and Waiver

Please Read Carefully Before Signing

In consideration of being allowed to participate in any way in the program, related events and activities, I the undersigned, acknowledge, appreciate, and agree that:

The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death. **I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS**, both known and unknown, **EVEN IF ARISING FROM THE GROSS NEGLIGENCE OF THE RELEASEES** or others, and assume full responsibility for my participation. I willingly agree to comply with terms and conditions for participation. If 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.

I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, **HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS PLUM ISLAND KAYAK, INC.**, its officers, officials, agents and/or employees, other participants, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event (RELEASEES), from any and all claims, demands, losses, and liability arising out of or related to any **INJURY, DISABILITY OR DEATH** I may suffer, or loss or damage to person or property, **WHETHER ARISING FROM THE GROSS NEGLIGENCE OF THE RELEASEES OR OTHERWISE,** to the fullest extent permitted by law.

I herby grant Plum Island Kayak permission to use, for promotional purposes only, any photograph or video taken of me (by them) during my participation in this program.

*** IMPORTANT:** 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's Name (print) | Age (If under 18) | Date

X _____

Participant's Signature

_____ _____ _____ _____

Street Address | City | State | Zip

_____

Email address (please print clearly)

FOR PARENTS/GUARDIANS OF PARTICIPANT OF MINOR AGE (UNDER AGE 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 liability incidents to my minor child's involvement or participation in these programs as provided above, **WHETHER ARISING FROM THE GROSS NEGLIGENCE OF THE RELEASEES OR OTHERWISE**, to the fullest extent permitted by law.

X_____ _____ / _____ / _____ _____

Parent/Guardian Signature | Date | Emergency Phone Number(s)