

## PARTICIPANT RELEASE OF LIABILITY - FAMILY / GROUP ASSUMPTION OF RISK AGREEMENT \*\*\*READ BEFORE SIGNING\*\*\*

Organization Name:	Wild West Voyages LLC, Moab, U	Γ (the "Host")		
Minor Participant Full Na	ame (Print):			
	ame (Print):			
Minor Participant Full Na	ame (Print):			
	g allowed to participate in any way in tigned, acknowledge, appreciate, and		events and activities, and use of	
paralysis and death.  2. I KNOWINGLY AND THE NEGLIGENCE, AC participation.  3. My participation in sa If I observe any unusual bring such to the attentic 4. I, for myself and on b INDEMNIFY, AND HOL sponsors, advertisers, a any and all claims, dem suffer, or loss or damag	FREELY ASSUME ALL SUCH RISK CTS and OMISSIOINS OF THE RELE id activities is voluntary, and I willingly significant hazard during my presence on of the nearest official immediately. The end of the heart of the host, its officers, of the host host host host host host host host	S, both known and cases or others, as agree to comply with e or participation, I was presentatives and refficials, agents and post premises used to for related to any II	unknown, EVEN IF ARISING FROM and assume full responsibility for my th terms and conditions for participate will remove myself from participation next of kin, HEREBY RELEASE, for employees, other participants, conduct the event (RELEASEES), fron JURY, DISABILITY OR DEATH In	tion. and rom nay
myself, others, or may r Media Statement By signing below, I here or statements including Venue The Venue of any dispu- agents is a party shall b County, UT, and I agree	nership or employees if I suffer from an equire emergency care during my partery grant and convey to the Host all rigany and all photographic images and te that may arise out of this agreement e either the Town of Moab, UT Justice to submit to that court.	ticipation.  ght, title and interest video or audio recon  t or otherwise betw  e Court, or the Coun	in and to record my name, image, verdings made by the Host.  een the parties to which the Host or i	
Legal Gualulati Full Nai	ne (Finit)		·····	
X_ Legal Guardian Signatu	re	Date	Emergency Phone Number(s	)
ITS TERMS, UNDERST	ELEASE OF LIABILITY AND ASSUM FAND THAT I HAVE GIVEN UP SUBS FARILY WITHOUT ANY INDUCEMEN	STANTIAL RIGHTS		)
Adult Participant Full Na	ame (Print)			
Address				
x				
Adult Participant Signat	ure	Age	Date	