

RELEASE OF LIABILITY – READ BEFORE SIGNING

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

- 1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular skills, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. 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,
3. 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 Marshall gates Foundation immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS THE Marshall Gates Foundation, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used for the activity ("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, to the fullest extent permitted by law.

\*HEALTH INSURANCE INFORMATION

COMPANY \_\_\_\_\_ NAME ON INSURANCE \_\_\_\_\_
POLICY # \_\_\_\_\_ PHONE # \_\_\_\_\_

\*OUTSIDE ACTIVITIES

I understand that the foundation activities take participants to a variety of places. Participants will have time for themselves as well as organized activities with the foundation. These activities include but are not limited to visiting and swimming at the beach in California, swimming at any of the various hotels pools, shopping, eating at restaurants etc...

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. I HAVE COMPLETELY READ AND UNDERSTAND THIS FORM.

X \_\_\_\_\_ Age: \_\_\_\_\_ Date Signed: \_\_\_\_\_
Participant's Signature

PARENTS/GUARDIANS OF PARTICIPANT

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his release as provided above 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 these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

X \_\_\_\_\_
Parent/Guardian Signature Emergency Phone# \_\_\_\_\_ Date Signed \_\_\_\_\_