

WAIVER AND RELEASE OF LIABILITY

(Read carefully before signing)

In consideration of being allowed to participate in any way in the Catskill Outdoor enterprise, Inc., dba Catskill Adventure Resort, related events, activities and facilities, the undersigned acknowledges, appreciates and agrees that;

- 1) The risk of injury from the activities involved in the programs of skateboarding, rollerblading and biking in and around the skate park area are significant, including the potential for permanent paralysis and death. While particular rules, equipment and personal discipline may reduce the risk, the risk of serious injury and / or death does exist and
- 2) **I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS**, both known and unknown, **EVEN IF ARISING FROM THE NEGLIGENCE OF THE CATSKILL ADVENTURE RESORT**, it's owners, agents, officers, employees or other participants and the undersigned willfully assumes full responsibility for any and all participation and
- 3) Willingly agrees to comply with the stated and customary terms and conditions as well as all posted rules for participating. If however, I observe any unusual or significant hazards during my presence or participation, I will remove myself from participating and immediately bring such hazard to the attention of the nearest staff member and
- 4) I, for myself and on behalf of my heirs, assign, personal representatives and next of kin **HEREBY RELEASE AND HOLD HARMLESS** Catskill Adventure Resort, it's owners, officers, agents, employees and other participants **WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, OR LOSS OR DAMAGE TO PERSON OR PROPERTY, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASE OR OTHERWISE.**

I have read and fully understood this waiver and release of liability and assumptions of risk agreement, understand its terms and understand I am giving up substantial rights by signing it and I sign it freely and voluntary without inducement.

Print Name _____ Address _____

(_____) _____ /_____/_____
Phone Number Age Date of Birth

Signature _____

Signature of Parent/Guardian
(If participant is under the age of 18)

Parent / Guardians Name _____