



PARTICIPANT RELEASE OF LIABILITY & ASSUMPTION OF RISK AGREEMENT

PLEASE READ BEFORE SIGNING

Participant Name (please print clearly) _____

Insurance company requires ONE PERSON per form First _____ Last _____

Street _____

City _____ State _____ Zip _____

Primary Phone (_____) _____ Alt Phone (_____) _____

Email(s) _____

ACA Number _____ Exp. Date _____ Date of Birth _____

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

1. The risk of injury from the activities involved in this watersports program is significant, including but not limited to (1) changing water flow, tides, currents and wave action, (2) collision with other participants or watercraft and manmade or natural objects, including capsizing, (3) varying wind and temperatures, including inclement weather and lighting, (4) any limitations in my ability to swim, follow directions, maintain my balance, and operate the equipment, (5) exposure to the elements, which may result in hypothermia, sunburn, sunstroke, dehydration, fatigue, chill and/or dizziness, (6) equipment failure, (7) the presence of insects and marine life and (8) the potential for permanent paralysis and death.
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.
3. 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.
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS Cascade Canoe & Kayak Centers, Inc, the Blue Heron Marina, City of Bellevue, City of Kenmore, American Canoe Association and their 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, to the fullest extent permitted by law.

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.

_____/_____/ 2019 X _____
Date Participant's Signature Age

FOR PARENTS/GUARDIANS OF PARTICIPANT OF MINOR AGE (UNDER AGE 18)

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, to the fullest extent permitted by law.

Parent/Guardian Name (please print clearly) _____
First _____ Last _____

X _____ (_____) _____
Parent/Guardian Signature Date Emergency Phone Number