



WAIVER, RELEASE & INDEMNITY

2019 Waiver

NAME: _____ AGE: _____ DATE OF BIRTH (YY/MM/DD): ____/____/____

All persons participating in the EcoSuperior Environmental Programs ("EcoSuperior") cycling events, programs, tours, or activities organized, operated, and/or conducted by EcoSuperior, as the case may be (collectively, the "Program") must complete this form. Failure to complete this form and return it to EcoSuperior will prohibit participation in the Program.

- 1. I am aware that cycling involves the possibility of injury or death.
2. I hereby acknowledge that there are certain risks of injury inherent in the participation in any outdoor recreation activity.
3. I accept the above noted risks, even though they may not be known or expected, and all other risks arising from my participation in the Program...
4. I understand that all applicable rules for participation in the Program must be followed and that SOLE RESPONSIBILITY FOR MY PERSONAL SAFETY REMAINS WITH ME...
5. I undertake and agree to remove myself from participation in the Program if I sense or observe any unusual hazard or unsafe condition...
6. I agree to indemnify, release, and save harmless EcoSuperior, and its officers, directors, employees, instructors, agents, assigns and volunteers from any claims, demands, causes of action, and all expenses, fees and cost awards...
7. I have had sufficient time to review and seek explanation for, and have carefully read and understand the provisions contained in this Informed Consent, Waiver and Indemnity and am fully aware of the inherent risks and dangers involved in the participation by my child in the Program and agree to be bound by this Agreement.

SIGNATURE: _____ DATE: _____

PARENTAL CONSENT FOR MINOR PARTICIPANT and INDEMNITY AGREEMENT

I have read and understood the above waiver, release and indemnity, and have discussed the same with the minor person signing above. I am satisfied the said minor understands the waiver and release and his/her obligations as set out. In consideration of the participation of my minor child/ward in the Program I agree the terms set out above on my own behalf and on behalf of my child. I am aware that by signing this agreement I am waiving substantial legal rights, which my minor child/ward and I, our respective heirs, executors, administrators and next of kin may have against the Releasees.

SIGNATURE: _____ DATE: _____