ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM

Activity or Event (Please Select One): ☐ Scientific Field Trip (Indicate Trip Note Child Care Services)	umber)		Fun Run/Fun Walk Student Volunteer	
I HEREBY ASSUME ALL OF THE RIS ACTIVITY OR EVENT, including by w carelessness on the part of the persons or owned, maintained, or controlled by then	ay of example a entities being re	nd not limitation eleased, from da	a, any risks that may arise frongerous or defective equipment	m negligence or
I certify that I am physically fit, have suf not been advised to not participate by a q or problems which preclude my participate	ualified medical	l professional. I		
I acknowledge that this Accident Waiver sponsors, and organizers of the activity or responsibilities at said activity or event.				
In consideration of my application and ponoted below for myself, my executors, ac ENTITIES OR PERSONS: the Ecologica volunteers, representatives, and agents, the volunteers.	lministrators, he al Society of An	eirs, next of kin, nerica, Inc., (ESA	successors, and assigns vis-à A) and/or their directors, offi	-vis the following cers, employees,
(A) I WAIVE, RELEASE, AND DISC liability, including but not limited to, lift for my death, disability, personal injury hereafter occur to me including my training	iability arising fi y, property dama	rom the negliger age, property the	nce or fault of the entities or peft, or actions of any kind wh	persons released,
(B) I INDEMNIFY, HOLD HARMLE paragraph from any and all liabilities or caused by the negligence of release or	r claims made a			
I acknowledge that ESA and their director errors, omissions, acts, or failures to act of				
I acknowledge that this activity or event the potential for death, serious injury, and terrain, facilities, temperature, weather, v people including, but not limited to, partiand/or producers of the event, and lack o present for volunteers.	d property loss. 'vildlife, condition cipants, volunte	The risks included on of participants ers, spectators, controllers.	e, but are not limited to, thos s, equipment, vehicular traffic coaches, event officials, and d	e caused by c, actions of other event monitors,
I hereby consent to receive medical treatment illness during this activity or event.	ment which may	be deemed advi	isable in the event of injury,	accident, and/or
I understand that at this or related activitilikeness to be used for any legitimate purassigns.				
The Accident Waiver and Release of Lia maximum extent permissible under appli		onstrued broadly	to provide a release and wai	ver to the
I CERTIFY THAT I HAVE READ THIS AWARE THAT THIS IS A RELEASE O WILL.				
Signature (if under 18 years old, Parent or Guardian must also sign)	Age	Participant's N (Please print le		Date

PARENT / GUARDIAN WAIVER FOR MINORS (Under 18 years old)

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liability, loss, cost, claim, or damag	ge whatsoever which	may be imposed upon said parties because n behalf of the minor and the parents or legal	of any defect in or
or quardian further agrees to save a	nd hold harmless and	l indemnify each and all of the parties refer	red to above from all
the child or ward, to the terms of th	e Accident Waiver an	nd Release of Liability set forth above. The	undersigned parent
		activity or event, and has agreed individual	•