



# Release From Liability- Tours / Instruction

If the participant is under 18 years old, a parent or legal guardian must complete both sides of this form.

**I HAVE READ AND SIGNED THE WAIVER ON THE REVERSE SIDE OF THIS FORM: YES** \_\_\_\_\_

Tour/Class Name \_\_\_\_\_ Tour/Class Date \_\_\_\_\_

Participant's Name \_\_\_\_\_

Parent/Guardian Name (if participant is a minor) \_\_\_\_\_

Email Address \_\_\_\_\_

Postal Address \_\_\_\_\_

City \_\_\_\_\_ / State \_\_\_\_\_ / Zip \_\_\_\_\_

Home phone \_\_\_\_\_ / Work phone \_\_\_\_\_ / Cell Phone \_\_\_\_\_

Emergency Contact \_\_\_\_\_ / Emergency Phone # \_\_\_\_\_

### Safety Considerations

In order to best serve you we ask that you inform us of any medical or health condition you have that may cause injury or require emergency care during this trip and any other restrictions or concerns that may require our special attention.

Medical: Allergies \_\_\_\_\_ / Diabetes \_\_\_\_\_ / Other \_\_\_\_\_

Restrictions/ concerns: \_\_\_\_\_

Swimming Ability: Strong \_\_\_\_\_ / Average \_\_\_\_\_ / Poor \_\_\_\_\_ / Fearful of water \_\_\_\_\_

Previous Paddling Experience: \_\_\_\_\_

### Media Statement (optional)

By signing below, I hereby grant Nashoba Paddler, LLC permission to record my name, image, voice, or statements and convey to Nashoba Paddler, LLC all right, title and interest in these recordings, including any and all photographic images and video or audio recordings made by Nashoba Paddler, LLC.

X \_\_\_\_\_  
Participant Signature or Parent/Guardian Signature (if participant is a minor) \_\_\_\_\_ Date \_\_\_\_\_

**PARTICIPANT RELEASE OF LIABILITY  
ASSUMPTION OF RISK AGREEMENT  
\*\*\*READ BEFORE SIGNING\*\*\***

Organization Name: Nashoba Paddler, LLC  
Groton, MA 01450

Participant Name: \_\_\_\_\_  
Print Name

In consideration of being allowed to participate in any way in the program, 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.
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 Nashoba Paddler, LLC, its members, 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, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, 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.

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

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

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, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

X \_\_\_\_\_  
Parent/Guardian Signature Date Emergency Phone Number(s)