

FAMILY WAIVER OF LIABILITY for DSLPOA FAMILY EVENTS

NOTICE: Read carefully before signing EVENT: _____

Over the course of the year the Drag and Spruce Lakes Property Owners' Association (DSLPOA) offers family events for members in good standing and their families. Prior to entering in any event each participating family is required to complete this form and return it to a member of the DSLPOA Executive.

I, _____
PRINT FIRST & LAST NAME of Parent or Guardian

of _____
Drag or Spruce Lake Property Address

Email _____ Cell Phone _____ Alt Phone _____

I understand that all recreational and adventure activities which are part of a Family Event may involve some risk of injury or death from various hazards, both obvious and obscure, including but not limited to, injury by acts of other group participants, falling, being struck by falling objects, equipment failure, drowning and other risks or occurrences not set forth in this agreement. By signing this document, I accept and assume responsibility for each person listed on this form for any and all such risks — whether or not specifically itemized herein, and I acknowledge that the DSLPOA, its employees, associates, corporate officers, board members and any organization that DSLPOA represents or contracts with shall be held harmless and blameless in the event of such an aforementioned mishap. I know and am prepared for the aforementioned risks and will not look to any entity or individual nor hold them responsible for the well-being or the protection from such risks of anyone named on this form, whether or not those risks are known or unknown by those organizations or individuals. In consideration of participating in any and all DSLPOA events, I — on my behalf and on behalf of my heirs, assigns, and representatives — do hereby irrevocably release DSLPOA, its employees, associates, corporate officers, board members, family of the same and any organization that DSLPOA represents or contracts with, their successors and assigns from any and all claims which involve any nature of injury or death or damage to persons or property that may occur as a result of attendance or participation in such aforementioned events by anyone listed on this form. RESPECT: I understand that the Community of Drag and Spruce Lakes is a diverse and inclusive community and I undertake that I, my family and my friends will afford all activity participants and volunteers our respect, regardless of their ethnicity, gender identity, religious affiliation or other identifying characteristics. PRIVACY: I understand that my information will be used solely by DSLPOA to mail or email information about events and that my information will not be given to a third party. PHOTOS, VIDEOS, ETC: By signing this I give permission to DSLPOA, and photographers or videographers assigned by DSLPOA, to use any photos or video footage which includes myself, other family members or friends listed on this form for online or promotional purposes. I also give permission to use any written testimonies for promotional purposes.

SIGNATURE of Parent or Guardian _____
(FIRST & LAST NAME)

LIST FAMILY & FRIENDS AGE 18 OR OLDER

Print ADULT Attendee: FIRST & LAST NAME

Date _____

LIST FAMILY & FRIENDS UNDER THE AGE OF 18
and who the signed person is taking full
responsibility for

_____ Age _____

_____ Age _____

_____ Age _____

_____ Age _____

_____ Age _____