

PARENT/GUARDIAN LIABILITY RELEASE

For Volunteers Under the age of 18

BY SIGNING THIS FORM YOU ARE RELEASING WASHINGTON TRAILS ASSOCIATION AND FROM ANY AND ALL LIABILITY IN THE EVENT YOU ARE INJURED OR KILLED WHILE PARTICIPATING IN ANY PROJECT SPONSORED BY WASHINGTON TRAILS ASSOCIATION.

I wish to participate in projects sponsored by Washington Trails Association (WTA). By participating in these projects, I enhance my enjoyment of the outdoors, provide access to undeveloped wilderness and mountainous areas for myself and others, and meet others with similar interests. I am aware that projects sponsored by WTA involve the construction and maintenance of trails and recreation facilities, and that participation in these projects poses certain dangers, including but not limited to the hazards of traveling in wilderness or mountainous terrain, using hand or motorized construction tools (and of working in the proximity of such tools when used by others), injury or illness in remote places without medical aid, and unforeseen events caused by the forces of nature. In consideration for permitting me to participate in projects sponsored by WTA, I hereby release WTA, including any claims made by others for personal injury or property damage allegedly caused by me. This Release and Indemnity Agreement is a contract and not a mere recital and that it shall remain in effect for all projects sponsored by WTA. I HAVE READ THIS RELEASE AND INDEMNITY AGREEMENT IN ITS ENTIRETY.

I HAVE READ AND AGREE TO ABIDE BY THE WTA LIABILITY RELEASE. Parents or guardians must sign.

Participant Name: _____

Participant Signature: _____

Parent/Guardian Signature: _____

Please present this signed form to the Crew Leader at the beginning of your day on trail. Any Questions, call the WTA office at 206/625-1367.