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

Organization Name: Ace Kayaking			
Participant Name:			
In consideration of the Ace Kayaking enable me to participate in whitewat I agree as follows:			
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 ARISING FROM THE NEGLIGENCE OF THE R responsibility for my participation.	ELEASEES or o		
3. I willingly agree to comply with observe any unusual significant haza remove myself from participation and official immediately.	rd during my	presence or	participation, I will
4. I, for myself and on behalf of my next of kin, HEREBY RELEASE, INDEMNIFY, AND HOW the State of Tennessee, its offices other participants, sponsors, advert premises used to conduct the event (losses, and liability arising out of may suffer, or loss or damage to per NEGLIGENCE OF THE RELEASEES OR OTHER	rs, officia isers, and, i RELEASEES), f or related t son or proper	Ace Kayaking, ls, agents f applicable rom any and o any INJURY	United States, TVA and and/or employees, , owners and lessors of all claims, demands, , DISABILITY OR DEATH I ARISING FROM THE
I HAVE READ THIS RELEASE OF LIABILIT UNDERSTAND ITS TERMS, UNDERSTAND THA IT, AND SIGN IT FREELY AND VOLUNTARI	T I'VE GIVEN	UP SUBSTANTI	AL RIGHTS BY SIGNING
X			
Participant's Signature	Age	Date	Time of Trip
Email address			
		Type of Trip: (Kayak, Funyak, SUP)	
FOR PARENTS/GUARDIANS OF PARTICIPANT	OF MINOR AGE	. (UNDER AGE	18 AT TIME OF
REGISTRATION)			
This is to certify that I, as parent			
participant, do consent and agree to Releases, and, for myself, my heirs,			
to indemnify and hold harmless the R			
my minor child's involvement or part			
EVEN IF ARISING FROM THE NEGLIGENCE			
permitted by law.		•	
X			
Parent/Guardian Signature		Emerge	ncy Phone Number(s)