



# liability waiver form

I, \_\_\_\_\_ (name of participant) understand that participation in one of *arising's* nature retreats/ programs in wilderness settings involves inherent risks and dangers, including hazards associated with participating in nature activities, variable weather conditions and on rivers and in outdoor areas that are remote (although accessible) and, as in all outdoor activities, are inherently dangerous.

I confirm that I am in good health. I understand that such activities are often physically and emotionally demanding. I further understand that I voluntarily choose to participate in the activities and accept and assume the risk of bodily injury, death or property damage occurring while participating in them not withstanding such risks and dangers.

I undertake to abide by the rules, directives and guidelines of *arising* and to indemnify *arising*, their directors, their partners, volunteers, and their personnel from any loss, damage, injury or death caused as a result of my actions, deliberate or otherwise. I acknowledge if I fail to adhere to or abide by the safety directives and guidelines of *arising* I may be requested by *arising* members to withdraw from the program, in either of which events I shall not be entitled to any reimbursement of monies paid for my participation.

I assume full responsibility for all risks and other eventualities, and in so doing hereby release and forever discharge *arising* directors, their partners, volunteers, and their personnel from any and all claims, demands, actions, and causes of action related to or that occur out of my participation in an *arising* nature retreat program or while traveling to and from the location of same.

In executing this Agreement I acknowledge that I have fully read and understand its terms and consequences, that I have the right to legal advice and that I am signing same on my own free will and volition and not being under any undue pressure or duress to do so.

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Name of Participant in Full	Signature	Date
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\* If you are under eighteen years of age, your parent or guardian must complete the following:

I, the undersigned as the responsible parent or guardian of the above named participant who is under eighteen years of age hereby acknowledge confirm and accept all of the above terms and consequences herein contained for and on behalf of same as well as myself.

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Name of Parents/Guardians in Full	Signature	Date
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\*\* I am aware that during my *arising* experience photographs, videos and slides may be taken of myself and other participants. I consent to allow *arising* to use this material for promotional purposes and public viewing.

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Name of Participant in Full	Signature	Date
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