Central New York Orienteering – Scout O – Waiver Form

(Please print or write clearly.)

This form is a waiver only. To register for one or both days of the event, complete the registration form. All participants, including adults, must sign a waiver (parent or legal guardian must sign for participants under age 18). Feel free to print additional forms if needed.

Rev: 9/12/2018

Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement

In consideration of being permitted to participate in any way in the Orienteering USA member club events, I and/or my minor child, our personal representatives, assigns, heirs, and next of kin:

1. Acknowledge, agree, and represent that I and/or my minor child understand the nature of orienteering activities and that I and/or my minor child are qualified, in good health, and in proper physical condition to participate in such activity. I further agree that if at any time I believe conditions to be unsafe, I and/or my minor child will immediately discontinue further participation in the activity.
2. Fully understand that (a) orienteering activities involve risks and dangers of serious injury or in extreme cases, death. (risks) (b) these risks and dangers may be caused by me and/or my child's own actions, or inaction, or the actions or inaction of others participating in the activity, the condition in which the activity takes place, or the negligence of the “releasees” named below; (c) there may be other risks either not known to me or not readily foreseeable, and I fully accept all such risks and responsibility for losses, costs and damages, I and/or my minor child incur as a result of my participation in the Activity.
3. Hereby accept and assume all such risks, and assume all responsibility for the losses, costs and/or damages following such injury, or death, even if caused in whole or in part, by the negligence of the “releasees” named below.
4. Hereby release, discharge and covenant not to sue the member club, their respective administrators, directors, agents, officers, officials, volunteers, and employees, other participants, any sponsors, advertisers, Orienteering USA, host third party operators and if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "releasees" herein) from all liability, claims, demands, losses or damages on my account caused or alleged to be caused in whole or in part by the negligence of the “releasees” or otherwise, including negligent rescue operations, and I further agree that if, despite this release and waiver of liability, assumption of risk and indemnity agreement I and/or my minor child, or anyone on my and/or my minor child's behalf, makes a claim against any of the releasees I will indemnify, save and hold harmless each of the releasees from any litigation expenses, attorney fees, loss, liability, damage, or cost which may incur as the result of such claim.
5. I have read this agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and have signed it freely without the inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.
6. The undersigned, if not already a member of Orienteering USA, is granted a one-time guest membership to Orienteering USA for the dates stated below. Please note that this membership does not entitle you to the entire list of benefits of an annual member.

Event Site: **Highland Forest, Fabius, NY** Event Dates: **November 2-4, 2018**

Leader Name _____ Troop/Group/Pack/Crew # _____

(Parent or Legal Guardian must sign if participant is under age18.)

Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date

By signing below, I accept the Waiver that is presented by the Central New York Orienteering Club.

(Parent or Legal Guardian must sign if participant is under age18.)

Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date
Participant (print name)	Age	Signature	Date