PARTICIPANT RELEASE OF LIABILITY
ASSUMPTION OF RISK AGREEMENT
READ BEFORE SIGNING

Organization Name: **Wild West Voyages LLC Moab, UT (the "Host")**

Adult Participant Full Name (Print):_____

Adult Participant Address_____

In consideration of being allowed to participate in any way in the program, related events and activities, and use of equipment, I the undersigned, acknowledge, appreciate, and agree that:

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 SUCH RISKS**, both known and unknown, **EVEN IF ARISING FROM THE NEGLIGENCE, ACTS and OMISSIOINS OF THE RELEASEES** or others, and assume full responsibility for my participation.

3. My participation in said activities is voluntary, and I willingly agree to comply with terms and conditions for participation. If I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately.

4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, **HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS** the Host, its officers, officials, agents and/or employees, other participants, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event (RELEASEES), from any and all claims, demands, losses, and liability arising out of or related to any **INJURY, DISABILITY OR DEATH** I may suffer, or loss or damage to person or property, **WHETHER ARISING FROM THE NEGLIGENCE, ACTS OR OMISSIONS OF THE RELEASEES OR OTHERWISE,** to the fullest extent permitted by law.

Health Statement
I will notify the Host ownership or employees if I suffer from any medical or health condition that may cause injury to myself, others, or may require emergency care during my participation.

Media Statement
By signing below, I hereby grant and convey to the Host all right, title and interest in and to record my name, image, voice, or statements including any and all photographic images and video or audio recordings made by the Host.

Venue
The Venue of any dispute that may arise out of this agreement or otherwise between the parties to which the Host or its agents is a party shall be either the Town of Moab, UT Justice Court, or the County or State Supreme Court in Grand County, UT, and I agree to submit to that court.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

X_____ _____ _____
Adult Participant's Signature Age Date

Emergency Contact _____