

RAVENS-WAY WILD JOURNEYS LLC - RELEASE AND WAIVER OF LIABILITY

Read and understand before signing this Assumption of Risk Agreement required to participate

I (print name) _____, as Parent or Guardian for (print name) _____ hereby freely, willfully, and without duress execute this Release and Waiver of Liability and Assumption of Risk Agreement on (date/program) _____ in favor of Ravens-Way Wild Journeys L.L.C as follows:

1. ASSUMPTION OF RISK: I certify that as the Parent/Guardian with legal responsibility for this participant, I do consent and freely agree to allow the participation in the public and/or private outdoor education events, classes, workshops, meals, and/or Glamping and Camping offered by Ravens-Way Wild Journeys L.L.C. (henceforth referred to as RWWJ Program(s)). I recognize and understand that my choice to allow my minor child’s participation in any RWWJ Program(s) may place my minor in inherently risky outdoor and/or indoor activities/situations, both known and unknown, in potentially risky wilderness areas and/or environment(s) during the day and night. I fully understand that participating in a RWWJ Program(s) may include risks that include but are not limited to: exposure to forces of nature, injuries that may be associated with walking and hiking in uneven terrain (both on and off trails), tripping or falling in remote wilderness areas, effluent in river beds, other water hazards, traveling by auto, exposure to dangerous plants, encountering dangerous insects and animals such as, but not limited to: bears, mountain lions, Africanized bees, stinging ants, venomous snakes and other venomous animals. I fully understand that any outdoor activity requires precautionary safety measures and therefore agree to instruct my minor child to follow all directions and instructions provided by the RWWJ instructional staff. I agree to voluntarily remove my child from participation in any activity I deem too risky. I affirm that my minor child’s participation in any RWWJ Program(s) is my own choice and I assume full responsibility for all dangers and risks. I KNOWINGLY AND FREELY ASSUME ALL THE RISKS INHERENT IN ANY/ALL RWWJ PROGRAM(s) my minor child will attend, even if arising from negligence of the releases or others, AND I ASSUME FULL RESPONSIBILITY FOR MY MINOR CHILD’S PARTICIPATION.

2. HEALTH AND MEDICAL: I agree that it is my responsibility to get medical clearance for my minor child prior to participating in any/all RWWJ Program(s). I hereby affirm that there are no health-related issues or problems that preclude or restrict my minor child’s participation in this RWWJ Program(s). I hereby certify that I have active medical and health insurance coverage that will be maintained with full force and effect for the duration of my child’s participation in this Program, and that such coverage will be considered primary in the event of an accident or injury my child may sustain in the course of my participation in any/all RWWJ Program(s). I release and forever discharge Ravens-Way Wild Journeys LLC, it’s owner, officials, officers, employees, and agents from any claim whatsoever, including but not limited to those arising or which may hereafter arise on account of any first aid, treatment, or service rendered in connection with my minor child’s participation in any/all RWWJ Program. I understand and acknowledge that the execution of this Release will release and free Ravens-Way Wild Journeys LLC from any financial or other assistance in the event of injury, or death, or property damage. **I am describing below any Medical Issues, Allergies, and/or health problem(s) and procedures that should be followed if a problem occurs. I agree to attach an additional sheet if necessary.** _____

3. EMERGENCY CONTACT: Name _____ Day Phone _____
Cell Phone _____ Evening Phone _____

4. RELEASE AND WAIVER OF LIABILITY: I hereby release and forever discharge and hold harmless RAVENS-WAY WILD JOURNEYS LLC, it’s owners, officials, officers, employees, and agents and their successors from any and all liability and claims, special expenses incurred in connection with any injury or danger suffered by my minor child, demands, losses, debts, rights of action, or actions, of whatever kind of nature, either in law or equity, which arise or may hereafter arise for myself and on behalf of my heirs, out of or related to any injury, disability, or death my minor child may suffer, loss or damage to person or property, which may arise from participation in any/all RWWJ Program(s), whether arising from negligence of the releases or otherwise, to the fullest permitted law.

5. SIGNATURE: I indicate that by my signature below I have read the terms and conditions of my minor child’s participation and agree to abide by them freely and voluntarily without inducement. I have carefully read this Release of Liability and Assumption of Risk Agreement, I fully understand the terms and conditions of this Agreement and therefore this constitutes a release and assumption of risk by me, and shall be binding on my heirs, executors, and administrators. This Release of Liability shall continue in full force and effect and be governed by the laws of the State of Arizona.

Parent or Guardian Signature



Date