



Washington State Parks
 ELC Office
 PO Box 42650
 Olympia WA 98504-2650
 (360) 902-8600

Environmental Education Program Individual Participant Program Waiver and Release of Liability

In consideration of being allowed to participate in any way in _____ at

_____, and related activities, the undersigned:

1. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions or negligence, but the actions, inactions or negligence of others, the rules and standards of participation, or the condition of the premises or of any equipment used. Further, that there may be other inherent risks not known to us or not reasonably foreseeable at this time. Activities that involve risk include, but are not limited to, kayaking/canoeing, nighttime campfire activities, hiking/backpacking, including off-trail, and adverse terrain, plant, and wildlife.
2. Assume all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.
3. Release, waive, discharge and covenant not to sue Washington State Parks and Recreation Commission, and its officers and agents, including contracted staff operating within the scope of their contract, all hereinafter referred to as "releasees", from any and all liability to the undersigned, his or her heirs and next of kin for any and all claims, demands, losses or damages on account of injury, including death or damage to property, causes or alleged to be caused in whole or in part by the negligence of the releasees or otherwise.

Dated This _____ Day Of _____, 200 _____

Address: _____ City: _____ State: _____ Zip _____

Printed Name: _____ Signature: _____

Phone: ()

Alternate Phone: ()

4. If the participant is under 18 years of age, the parent(s) or guardian(s) MUST execute the following waiver:

The undersigned referred to as the parent(s) and natural guardian(s) or legal guardian(s) have read the above waiver and release. The undersigned does there by represent that he/she (they) is (are), in fact, acting in such capacity and agrees to save and hold harmless and indemnify each and all of the parties herein referred to above as releasees from all liability, loss, cost, claim or damage whatsoever may be imposed upon said releasees because of any defect in or lack of such capacity to so act and release, waive, discharge and covenant not to sue releasees on behalf of both of the undersigned.

Name and Age of the Participant under the Age of 18: _____ / _____
(Please Print)

Printed Name of Parent or Guardian

Printed Name of Parent or Guardian

Signature of Parent or Guardian **Date**

Signature of Parent or Guardian **Date**

APPLICANT: Return ALL THREE COPIES to the above address