

Activity Waiver and Photo Release

Acknowledgment of Participant Responsibility, Express Assumption of Risk, Release of Liability, and Relevant Permissions

Activities and Risks: Participation in hiking, walking, and other activities organized or sponsored by Connect Edgmont, Annie Thorne and Steve Brook (collectively, "CE") present certain risks, both foreseen and unforeseen. These may include, but are not limited to, personal injury due to dehydration, heat stroke, frostbite, hypothermia, skin rashes, bee stings, diseases carried by ticks and mosquitos, sprained or broken bones and falls that may result in serious injury or death ("Injuries and Damages").

Assumption of Risk: By my participation in these activities, I agree and acknowledge that I am a consenting party to these activities and that I am aware of the risks of these activities. I appreciate the nature of the risks and voluntarily assume those risks.

I understand and confirm that:

- **I am ultimately responsible for my own safety.**
- I possess the necessary knowledge, skills, health, and physical fitness to participate in this activity.
- I have read and agree to any rules and conditions applicable to this activity that have been made available to me.
- My participation is at the discretion of the CE hike leaders and volunteers ("CE Leaders") assigned to coordinate the activity.

Having read this document in its entirety and in consideration of my acceptance as a participant in this activity I hereby agree as follows:

- I agree to WAIVE, DISCHARGE CLAIMS, AND RELEASE FROM LIABILITY CE, CE Leaders, and any landowners, municipalities, or other individuals and organizations connected with this activity, ("Associated Entities") on account of, or in any way resulting from, Injuries and Damages, even if caused by negligence of CE, CE Leaders, or Associated Entities.
- I further agree to INDEMNIFY AND HOLD HARMLESS CE, CE Leaders, and Associated Entities from any claims, damages, injuries, or losses resulting from my participation in this activity.
- I understand and intend that this assumption of risk and release is binding upon my heirs, executors, administrators, and assigns, and includes any minors accompanying me during this activity.

- I understand that this agreement is intended to be as broad and inclusive as is permitted by law. If any provision or any part of any provision of this agreement is held to be invalid or legally unenforceable for any reason, the reminder of this agreement shall not be affected thereby and shall remain valid and fully enforceable.
- I understand that the term “negligence” in this agreement includes, but is not limited to, ordinary negligence, gross negligence, and willful or reckless conduct.
- I grant CE my permission to use my photograph, story, image and/or likeness associated with this activity for promotion and advertising purposes without financial or other remuneration to me.

I represent that I am at least 18 years of age, have read and understand the foregoing statement, am competent to execute this agreement, and by doing so hereby waive certain legal rights.

Addendum: Willistown Township Participant Waiver

I, the undersigned, intending to be legally bound for myself, my heirs, executors, administrators, and assigns, hereby waive and release any and all rights and claims for damages I or my family may now or hereafter have against Willistown Township and its respective employees, elected officials, appointees, volunteers, partners, and contractors for any and all damages or injuries which may be sustained by me or my family arising out of me/our participation in activities and/or volunteering at Willistown Township properties.

PLEASE SIGN HERE:

Signature: _____ Date: _____

Name (printed): _____

Name (printed) of Participant (if under 18): _____

Parent name and signature required in lines above