



CAYUGA NATURE CENTER RELEASE / INDEMNIFICATION OF ALL CLAIMS

I agree that my participation in Cayuga Nature Center’s program and/or TEAM Challenge course is entirely voluntary.

That in consideration for participation in said program/course, I agree, on behalf of myself, my assigns, executors, and heirs, to RELEASE, INDEMNIFY, and HOLD HARMLESS Cayuga Nature Center, its trustees, officers, agents employees, and the Cayuga Nature Center’s programs, from any cause or action, claims or demands of any nature whatsoever, including but not limited to a claim of negligence, which I, my heirs, representatives, executors, administrators, and assigns may now have, or have in the future against Cayuga Nature Center on account of personal injury, property damage, death or accident of any kind arising out of or in any way related to my participation in Cayuga Nature Center’s programs or TEAM Challenge Course occurring from _____to _____including any act or omission of any third party (rescue squad, hospital, etc...)

I understand that Cayuga Nature Center, nor the programs and/or Team Challenge program provides any Accident or Medical Insurance and that I am required to provide my own Accident and Medical Insurance. I hereby agree that I am financially responsible for all such expenses whatsoever.

I understand that all participants are subject to Cayuga Nature Center regulations, Program and TEAM Challenge course guidelines, laws of the United States, and the laws of New York State, and that in the event of violation of these, or behavior which is considered by Cayuga Nature Center to be detrimental of the participant, other participants, or the Cayuga Nature Center program, Cayuga Nature Center shall have the right to dismiss the participant from the course while retaining all payments.

I have read and understand the terms of this Agreement and Release and agree to all terms and conditions on behalf of myself, heirs, representatives, executors, or administrators. I hereby certify by my signature that I am physically fit and able to participate in this Cayuga Nature Center program. Consistent herewith, I assume responsibility for my own physical fitness and capability to participate in the course and have taken such steps as I deem appropriate to assure myself that I am fit and capable of such participation.

I further state that I am cognizant of all the inherent dangers of participation and the risks involved in this program which includes but is not limited to drowning, rock fall, lightning, extreme weather conditions, environmental injuries, road crossings, motor vehicle accidents equipment failure, wildlife attacks, sprained ankles, broken legs, etc. I understand that I may be a long distance from medical facilities. I state that I am of lawful age and legally competent to sign this affirmation and release; that I understand the terms herein are contractual and not mere recital, and that I have signed this document as my own free act.

Participant _____ Date of Birth _____ Date _____

Witness _____ Date _____

Parent or Guardian _____ Date _____

If under 18 years of age.

Note: THIS DOCUMENT WILL AFFECT YOUR LEGAL RIGHTS. PLEASE READ CAREFULLY.

Cultivating awareness, appreciation and responsibility for the natural world.