GROUP WAIVER (pg. 2):

Acknowledgement of Understanding: I acknowledge that I have read the attached waiver of liability and fully understand its terms. I affirm that I am voluntarily visiting or participating in activities at the above location(s) and further acknowledge that I know, understand, and appreciate the inherent risks of the visitation or participation. I assume full responsibility for any and all injuries or damages which may occur to me as a result of the inherent risks associated with the visitation or participation.

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

GROUP WAIVER (pg. 3):

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

GROUP WAIVER (pg. 4):

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

GROUP WAIVER (pg. 5):

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____

I understand and agree to the Waiver of Liability, Assumption of Risk and Indemnity Agreement:

Participant's Name (Print): _____

Signature: _____ Date: _____