

RELEASE FROM LIABILITY AND ASSUMPTION OF RISK

For the Annual Outing at Mt. Rainier, July 31 - August 1-14, 2021

This form applies to the Outing and any other days you are onsite. Read carefully before signing.

I am aware that Chemeketan activities, including the Annual Outing, are potentially dangerous and that accidents and illnesses can occur in remote places. In consideration of being permitted to join and participate in this Chemeketan activity, I do for myself, my heirs, legal representatives, or assigns (or, if applicable, as a parent or legal guardian of a minor), assume all risks associated with this activity and traveling to and from the activity, and release and discharge the Chemeketans, their officers and agents from all liability for any and all loss, damage or claim on account of property damage, death or bodily injury to me, my minor child or minors for whom I am legal guardian, caused by any act or failure to act of the Chemeketans, their officers and agents.

I agree to pay for my own medical and/or rescue expenses, whether or not authorized by me, in the event of accident or illness.

I have read and understand the above and voluntarily affix my signature below.

Name (print) _____ Phone _____

Signature of Applicant _____

Address _____ City _____ State _____ Zip _____

Signature of parent or guardian if applicant is a minor (under 21) _____

mail to: Chemeketan Outing, P.O. Box 864, Salem, OR 97308

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