

NORTH STAR SKI TOURING CLUB — ACTIVITY WAIVER FORM

Activity		Date(s)	
Location			
Leader		Phone	
Co-Leader		Phone	

I acknowledge that the above activity has inherent risks, hazards, and dangers for its participants, including risk of injury or death, and in consideration of my participation, I agree for myself, my heirs, successors, executors, and subrogees to hold harmless for any claim for any damages or injuries to myself or any minor child or ward or mine, the North Star Ski Touring Club (NSSTC), its members, trip leaders, and officers, and further agree to defend and indemnify NSSTC from any claim or injuries to said minor child or ward of mine.

Participants:

	Name Printed Legibly	Signature	NSSTC Member?
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Leader: Please use back side for comments. Return completed form to:
 NSSTC, Inc.
 Attn: Safety Coordinator
 P.O. Box 4275
 St. Paul, MN 55104