



## **SIERRA NEVADA CANOE AND KAYAK CLUB (SNCKC)**

### **ANNUAL WAIVER AND RELEASE OF LIABILITY (IMPORTANT—READ BEFORE SIGNING)**

I \_\_\_\_\_ (and) \_\_\_\_\_  
am aware that the SNCKC Trip Hosts are not trained guides, rescue specialists, or first aid specialists. I am also aware that I am personally responsible for my own safety, and have determined that my skills, training, physical condition etc. are appropriate for participating in the SNCKC activities that I choose.

In consideration of being allowed to participate in any way in the SNCKC paddle trips, programs, and related events and activities, the undersigned agrees to the following:

I acknowledge and fully understand that I will be engaging in activities that involve risk of damage to personal property or serious personal injury, including permanent disability and death, and severe social and economic losses which might result not only from my own actions, inactions or negligence, but the actions, inactions or negligence of others, the rules of play, the condition of the premises, or of any equipment used. Further, there may be other risks not known or not reasonably foreseeable at this time.

I assume all the foregoing risks and accept personal responsibility for all expenses, medical or otherwise, following any such damages, injury, permanent disability or death.

I release, waive, discharge and covenant not to sue SNCKC, its affiliated clubs, their respective administrators, directors, agents, coaches, and other employees of the organization, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and leasers of premises used to conduct the event, all of which are hereinafter referred to as "releasees," from any and all liability to me, my heirs and next of kin for any and all claims, demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasees or otherwise.

This waiver may not be modified in any way. If any part of this waiver is determined to be invalid by law, all other parts of this waiver shall remain valid and enforceable.

**I HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I  
HAVE GIVEN UP SUBSTANTIAL LEGAL RIGHTS BY SIGNING IT AND HAVE SIGNED  
IT VOLUNTARILY.**

over

**Why do we need the following information?**

Ability to communicate with one another on trips or leading up to trips is extremely important. All notices of trips and other events will go out by email. Cell phone numbers, (if available) are important to communicate in the event of trip cancellations, people getting lost, etc. This information must be current and it is the responsibility of the Applicant to inform SNCKC of any changes to address, phone numbers, and email address. **Please print clearly.**

SNCKC's policy is to never share this information with any other persons, organizations, or businesses.

1. PRINT Applicant 1's name: \_\_\_\_\_  
Signature of Applicant 1: \_\_\_\_\_  
Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_  
Email: \_\_\_\_\_

2. PRINT Applicant 2's name: \_\_\_\_\_  
Signature of Applicant 2: \_\_\_\_\_  
Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Other members of the household: (Add age if under 18)**

1. PRINT Name: \_\_\_\_\_ Age \_\_\_\_\_  
2. PRINT Name: \_\_\_\_\_ Age \_\_\_\_\_  
3. PRINT Name: \_\_\_\_\_ Age \_\_\_\_\_  
4. PRINT Name: \_\_\_\_\_ Age \_\_\_\_\_

PRINT Parent/Legal Guardian's Name: \_\_\_\_\_

Parent/Legal Guardian's Signature: \_\_\_\_\_