



# Activity Sign-In Sheet

**ALL PARTICIPANTS MUST READ AND SIGN. PLEASE READ CAREFULLY BEFORE SIGNING THIS ACKNOWLEDGMENT, WAIVER, AND RELEASE FROM LIABILITY.**

**WAIVER & RELEASE FROM LIABILITY:** I accept and clearly understand that there are inherent and other risks involved in performing physical activities of any nature. I certify that I am physically fit for the events and volunteer opportunities sought (collectively “Activities” and individually “Activity”) and have not been advised by a physician to refrain from engaging in such activities. I confirm that I have the requisite skill set to competently and safely perform the Activities. If at any time I feel that the Activity which I am performing is beyond my skill set I certify that I will immediately cease performing the Activity and notify Genesee Land Trust through its board of directors, agents, employees or volunteer leaders, of such. I accept and acknowledge the risks involved in performing the Activities and I knowingly and freely assume those risks. In consideration of the opportunities to participate in events and/or serve as a volunteer for Genesee Land Trust, and the opportunities to participate in Activities, I hereby take the following action for myself, my executors, administrators, heirs, next of kin, successors and assigns, or anyone else who might claim and/or sue on my behalf or on behalf of my heirs and assigns, and I expressly acknowledge that it is my intent to take these actions:

**(A) I WAIVE, RELEASE, AND DISCHARGE THE FOLLOWING PERSONS OR ENTITIES:** GENESEE LAND TRUST, ITS BOARD OF DIRECTORS, AGENTS, EMPLOYEES, VOLUNTEERS, SUCCESSORS AND ASSIGNS (“GENESEE LAND TRUST”) FROM ANY AND ALL CLAIMS, ALLEGATIONS, LOSSES, OR LIABILITIES FOR DEATH, PERSONAL INJURY, PARTIAL OR PERMANENT DISABILITY, LOST WAGES, PROPERTY DAMAGE, MEDICAL OR HOSPITAL BILLS, THEFT, OR DAMAGE OF ANY KIND, INCLUDING ECONOMIC LOSSES, WHICH MAY IN THE FUTURE ARISE OUT OF OR RELATE TO MY PARTICIPATION IN OR TRAVELING TO OR FROM ACTIVITIES, REGARDLESS IF SUCH DAMAGES OR INJURY IS DUE IN WHOLE OR IN PART TO THE NEGLIGENCE OF GENESEE LAND TRUST; **(B) I WAIVE MY RIGHTS TO BRING AN ACTION AGAINST** Genesee Land Trust, and/or any of the persons or entities mentioned above in statement (A), for any of the claims, losses, or liabilities that I have waived, released, or mentioned above in statement (A); **(C) I AGREE TO INDEMNIFY AND HOLD HARMLESS** Genesee Land Trust, and/or any of the persons or entities mentioned above in statement (A) from any of the claims made or liabilities assessed against them as a result of my negligent actions or inactions.

**PHOTO/VIDEO WAIVER:** I grant to Genesee Land Trust, the right to take photographs/video of me in connection with the above-identified Activities. I authorize Genesee Land Trust, their assigns and transferees to copyright, use, and publish the same in print and/or electronically. I agree that Genesee Land Trust may use such photographs/video of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and web content.

**I HEREBY CERTIFY THAT I AM EIGHTEEN (18) YEARS OF AGE OR OLDER, I HAVE READ THIS DOCUMENT, AND I UNDERSTAND ITS CONTENTS.**

Are you a member?	NAME	EMAIL ADDRESS	SIGNATURE

Activity: \_\_\_\_\_

Date: \_\_\_\_\_



# Minor Activity Consent

For persons under 18 years of age, a parent or legal guardian must complete and sign the Genesee Land Trust Minor Activity Consent form.

Activity: \_\_\_\_\_

Volunteer Name: \_\_\_\_\_

Address: \_\_\_\_\_

**WAIVER & RELEASE FROM LIABILITY:** I accept and clearly understand that there are inherent and other risks involved in performing physical activities of any nature. I certify that the volunteer named above (the "Minor") is physically fit for the events and volunteer opportunities sought (collectively "Activities" and individually "Activity") and has not been advised by a physician to refrain from engaging in such activities. I confirm that the Minor has the requisite skill set to competently and safely perform the Activities. If at any time the Minor feels that the Activity which he/she is performing is beyond their skill set I certify that he/she will immediately cease performing the Activity and notify Genesee Land Trust through its board of directors, agents, employees or volunteer leaders, of such. I accept and acknowledge the risks involved in performing the Activities and I knowingly and freely assume those risks. In consideration of the opportunities to participate in events and/or serve as a volunteer for Genesee Land Trust, and the opportunities to participate in Activities, I hereby take the following action for the Minor, myself, my executors, administrators, heirs, next of kin, successors and assigns, or anyone else who might claim and/or sue on my behalf or on behalf of my heirs and assigns, and I expressly acknowledge that it is my intent to take these actions:

**(A) I WAIVE, RELEASE, AND DISCHARGE THE FOLLOWING PERSONS OR ENTITIES:** GENESEE LAND TRUST, ITS BOARD OF DIRECTORS, AGENTS, EMPLOYEES, VOLUNTEERS, SUCCESSORS AND ASSIGNS ("GENESEE LAND TRUST") FROM ANY AND ALL CLAIMS, ALLEGATIONS, LOSSES, OR LIABILITIES FOR DEATH, PERSONAL INJURY, PARTIAL OR PERMANENT DISABILITY, LOST WAGES, PROPERTY DAMAGE, MEDICAL OR HOSPITAL BILLS, THEFT, OR DAMAGE OF ANY KIND, INCLUDING ECONOMIC LOSSES, WHICH MAY IN THE FUTURE ARISE OUT OF OR RELATE TO THE MINOR'S PARTICIPATION IN OR TRAVELING TO OR FROM ACTIVITIES, REGARDLESS IF SUCH DAMAGES OR INJURY IS DUE IN WHOLE OR IN PART TO THE NEGLIGENCE OF GENESEE LAND TRUST; **(B) I WAIVE MY RIGHTS TO BRING AN ACTION AGAINST** Genesee Land Trust, and/or any of the persons or entities mentioned above in statement (A), for any of the claims, losses, or liabilities that I have waived, released, or mentioned above in statement (A); **(C) I AGREE TO INDEMNIFY AND HOLD HARMLESS** Genesee Land Trust, and/or any of the persons or entities mentioned above in statement (A) from any of the claims made or liabilities assessed against them as a result of my negligent actions or inactions; **(D) I AGREE TO RELEASE AND DEFEND** Genesee Land Trust, and/or any of the persons or entities mentioned above in statement (A) from any claims made or liabilities assessed against them as a result of any insufficiency of my legal capacity or authority to act for and on behalf of the Minor in the execution of the foregoing WRL or in the execution of this Consent. Whether I defend or indemnify and hold harmless such persons shall be determined in the sole discretion of the party entitled to such.

**MEDICAL TREATMENT WAIVER:** I hereby authorize any licensed physician, emergency medical technician, hospital or other medical or health care facility ("Medical Provider") to treat the Minor for the purpose of attempting treat or relieve any injuries received by said Minor arising out of or relating to Activities. I authorize any such Medical Provider to perform all procedures seemed medically advisable in attempting to treat or relieve any such injuries and any related conditions of the Minor that may be encountered during the course of attempting to treat or relieve such injuries. I consent to the administration of anesthesia as deemed advisable during the course of such treatment. I realize and appreciate that there is a possibility of complications and unforeseen consequences in any medical treatment, and I assume any such risk for and on behalf of myself and the Minor. I acknowledge no warranty is being made as to the results of any medical treatment.

**PHOTO/VIDEO WAIVER:** I grant to Genesee Land Trust, the right to take photographs/video of me in connection with the above-identified Activities. I authorize Genesee Land Trust, their assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that Genesee Land Trust may use such photographs/video of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and web content.

\_\_\_\_\_  
Print Parent/Guardian Name

\_\_\_\_\_  
Relationship to Minor

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date