

New Life Ranch
PROGRAM ACTIVITY RELEASE AND INFORMED CONSENT

The undersigned ("the Participant") hereby acknowledge that I will voluntarily participate in any New Life Ranch activity, with the understanding that, though NLR's staff will make reasonably diligent efforts to promote my safety and well-being, there are inherent risks of serious injury or death associated with participation in New Life Ranch activities (such as canoeing, gym and field games, horse-back riding, archery, riflery, hiking, all challenge course activities, and any other activities) which, however slight the chances of occurrence, cannot be reasonably and entirely eliminated. These risks include but are not limited to: falls from a height, exposure to severe storms or to weather related heat or cold, heat stroke, drowning, diving accidents or other water related injuries, injury from falling objects, injury from collision with other people or objects during activities, injuries from projectiles, and equipment failure. I hereby acknowledge, accept, and assume all risks of injury or even death to myself while I am engaged in New Life Ranch activities.

In consideration of participation in New Life Ranch activities, I (and if I am a minor, my parent or guardian acting on my behalf) hereby waive, release, discharge forever and hold harmless, indemnify, and covenant not to sue New Life Ranch, as well as its staff, board of directors, employees, or volunteers from all liability of any nature for any and all injuries, loss, death, claim or damage to my person or property I may suffer due to my own negligence, or the negligence of any other participant resulting from, arising out of, or in connection with my use of New Life Ranch's programs, its facilities, equipment or apparatuses. This release is binding on my heirs, personal representatives and assigns.

I HAVE CAREFULLY READ THIS DOCUMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS BOTH A RELEASE OF LIABILITY AND ACKNOWLEDGMENT OF NOTICE AND HAVE SIGNED IT OF MY OWN FREE WILL. I ALSO GIVE PERMISSION FOR NEW LIFE RANCH TO USE IMAGES AND RECORDINGS OF THE PARTICIPANT WITHOUT FURTHER COMPENSATION.

Please Print Name _____

Participant Signature _____ *Date* _____

Parent/Guardian _____ *Date* _____

Custodial Parent/Guardian Signature _____ *Date* _____