

# ADVENTURE 360

Adventures in Learning



## Paleo X

### Waiver Release

This is a legally binding document executed by me (Participant), \_\_\_\_\_, voluntarily delivered to **ADVENTURE 360**. I recognize that there are dangers and risks to which I may be exposed by participating in this program. By way of example only, the following are possible significant dangers and risks: dehydration, field work activity, injury and/or death. I understand that **ADVENTURE 360** does not require me to participate in the program, but I wish to do so, and acknowledge the possible dangers and risks and, for such reason, I am executing this document in favor of **ADVENTURE 360**.

Accordingly, I agree to assume all of the risks and responsibilities in any way associated with my participation in this program and agree that **ADVENTURE 360** is not responsible for the acts or omissions of any person or provider which is not under the control of **ADVENTURE 360** including, but not limited to, providers of transportation and accommodations. In consideration of the services, facilities and other assistance provided to me by **ADVENTURE 360** in connection with this program, I hereby release **ADVENTURE 360** from any and all liability, claims and actions that may arise from any injury or harm (including, but not limited to, fatal injury) to me, or damage to my personal property occurring in connection with this program. I understand that this release includes, without limitation, liabilities, claims and actions caused entirely or in part by the acts or omissions of **ADVENTURE 360** including, but not limited to, the negligence or mistake of or failure to supervise by **ADVENTURE 360**.

I recognize that this release means that I am surrendering, among other things, the right to sue **ADVENTURE 360** for any injuries, damages or losses which I may suffer or incur in connection with the Program. I also understand that this document shall bind my heirs, executors, administrators and assigns.

I further acknowledge that **ADVENTURE 360** is not responsible for any act, omission or event which may occur at any time when I am not participating in an activity included in the description of the program provided to me, as it may be altered from time-to-time by **ADVENTURE 360**.

I acknowledge that **ADVENTURE 360** is not responsible for the provision or cost of any medical treatment I may require during the program for any reason whatsoever. **ADVENTURE 360** has encouraged me to assure that my health insurance covers me during the program and has encouraged me to buy travel insurance. **ADVENTURE 360** will not have any liability regarding the provision of medical care or the adequacy of any medical care which may be rendered while I am participating in this program. **ADVENTURE 360** will endeavor to secure adequate medical care for me as needed. I understand that there will be no refunds available for unused portions of the Program caused by my health issues or by my voluntary failure to participate in such portions of this program.

I have read this entire document, I fully understand the document and I agree to be legally bound by this document.

**THIS IS A RELEASE OF MY RIGHTS WHICH I HAVE READ CAREFULLY BEFORE SIGNING.**

\_\_\_\_\_  
(Participant's Typed Name)

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Parent or Guardian Typed Name Required if  
Participant is under the age of 18)

\_\_\_\_\_  
Date

Please return by May 31, 2021