## PARTICIPANT AGREEMENT, RELEASE AND ASSUMPTION OF RISK

In consideration of the services of Experiential Learning Associates, their agents, owners, officers, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as " ELA "), I hereby agree to release, indemnify, and discharge ELA, on behalf of myself, my spouse, my children, my parents, my heirs, assigns, personal representative and estate as follows:

I acknowledge that my participation in hiking, camping, backpacking, rock climbing, ropes course, watersports, and kayaking
activities entails known and unanticipated risks that could result in physical or emotional injury, paralysis, death, or damage to myself,
to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of
the activity.

The risks include, among other things: accidents involving the hazards of walking on uneven terrain; slips and falls, falling objects; collision with fixed or movable objects; weather conditions; head injuries can occur; falling objects; water hazards; accidental drowning; being jolted, jarred, bounce, and shaken about; exhaustion; rafts or boats capsize; exposure to temperature and weather extremes which could cause cold water shock, hypothermia, hyperthermia (heat related illnesses), heat exhaustion, sunburn, dehydration; and exposure to potentially dangerous wild animals, insect bites, and hazardous plant life; rope burns; pinches, scrapes, twists and jolts, scratches, bruises, sprains, lacerations, fractures, concussions, or even more severe life threatening hazards; equipment failure; and improper lifting or carrying; my own physical condition, and the physical exertion associated with this activity; accidents or illness can occur in remote places without medical facilities and emergency treatment or other services rendered; consumption of food or drink; the condition of roads, terrain, or highways and accidents connected with their use.

Furthermore, ELA employees have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's fitness or abilities. They might misjudge the weather or other environmental conditions. They may give incomplete warnings or instructions, and the equipment being used might malfunction.

- 2. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks. Additionally, I agree to wear a U.S. Coast Guard approved personal flotation devise (life jacket) while participating in this activity.
- 3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless ELA from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of ELA 's equipment or facilities, including any such claims which allege negligent acts or omissions of ELA.
- 4. Should ELA or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
- 5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I am willing to assume the risk of any medical or physical condition I may have.
- 6. In the event that I file a lawsuit against ELA, I agree to do so solely in the state of Colorado, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining document shall remain in full force and effect.

By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against ELA on the basis of any claim from which I have released them herein.

I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.

Signature of Participant		Print Name			
Address					
Phone					
PAR	ENT'S OR GUARDIAN'S (Must be completed for p	ADDITIONAL INDEMN participants under the age			
In consideration of	e in its activities and to use it	its equipment and facilities,	I further agree to in	ndemnify and hold ha	armless
Parent or Guardian:	Print Na	ame:		Date:	