PARTICIPANT RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT ***READ BEFORE SIGNING***

Organization Name	Rapid Expeditions LLC		
Participant Name			
Print Name			
In consideration of being allowed to participate in any way in the program, related events and activities, I the undersigned, acknowledge, appreciate, and agree that:			
1. The risk of injury from permanent paralysis and d	n the activities involved in this preleath.	ogram is signi?cant, i	including the potential for
	D FREELY ASSUME ALL SU HE NEGLIGENCE OF THE R ticipation.		
3. I willingly agree to comply with terms and conditions for participation. If I observe any unusual signi? cant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest of?cial immediately.			
RELEASE, INDEMNIE agents employees, other p premises used to conduct arising out of or related to person or property, WHE	half of my heirs, assigns, personal FY, AND HOLD HARMLESS participants, sponsors, advertisers the event (RELEASEES), from a participant of any INJURY, DISABILITY CONTROL THER ARISING FROM THE the fullest extent permitted by law	Rapid Expeditions I , and, if applicable, ow any and all claims, der DR DEATH I may suf E NEGLIGENCE OI	LLC, its of?cers, of?cials, where and lessors of mands, losses, and liability ffer, or loss or damage to
FULLY UNDERSTAND	ELEASE OF LIABILITY AND A ITS TERMS, UNDERSTAND T T, AND SIGN IT FREELY AND	THAT I HAVE GIVE	N UP SUBSTANTIAL
X		10 - 12	<u> </u>
Participant's Signature		Age	Date
REGISTRATION) This is to certify that I, as agree to his/her release as of kin, I release and agree to my minor child's invol	pians of Participant of M s parent/guardian with legal responsible provided above of all the Release to indemnify and hold armless the livement or participation in these participation in these participation in the sequence of the RELEAS	onsibility for this particles, and, for myself, none Releasees from any programs as provided	cipant, do consent and ny heirs, assigns, and next and all liability incidents above, EVEN IF
X	-	-	
Parent/Guardian Sign	nature	Date	Emergency Phone

Number(s)