



Liability Waiver/Release Form

ACTIVITY:_____ DATES:_____

In consideration of the acceptance of the right to participate, participants, by execution of this entry form release and discharge Trails West, Inc. and their officers, directors, representatives, volunteers and anyone else connected with the management of Trails West, Inc. from all known or unknown damages, injuries, losses, judgments, and/or claims, from any cause whatsoever that may be suffered by participants to his person or property.

If participant is under 18 years of age, Parent or Guardian must sign.

I have read this form and agree to all conditions of Trails West, Inc. and rules governing the event and agree to observe all rules and directions of the event leaders.

PRINT NAME

SIGNATURE

DATE

_____	_____	_____
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