

ADIRONDACK MOUNTAIN CLUB, INC.
814 Goggins Road, Lake George, NY 12845-4117
(518) 668-4447

TRIP _____

DATE of TRIP _____

TRIP LEADER(S) _____

CHAPTER _____

RELEASE OF LIABILITY - GROUP FORM

By signing below, I acknowledge that the outdoor recreational activities associated with the above described trip to be conducted by the Adirondack Mountain Club, Inc. (ADK), and/or its chapters are rigorous outdoor sports activities which may involve the risk of personal injuries or death;

I hereby agree for myself, all of my family members and heirs, to be effective to the greatest extent permitted by law, to release ADK and any of its employees, officers, directors, members, trip leaders, chapters, or agents from any and all liability claims, losses, and/or damages for personal injuries or death which may occur during participation in the above-named trip and the outdoor recreation activities associated with said trip.

I hereby agree for myself, all my family members and heirs, to be effective to the greatest extent permitted by law, not to sue or make any negligence claim against ADK, or any of its agents, employees, officers, instructors, guides, directors, trip leaders and members for personal injuries or wrongful death suffered as a result of participation in the above-named trip or activity and the alleged negligence of any of the parties described above.

I intend this release and agreement not to sue to be effective whether or not the injury or death results, in whole or in part, from the negligence of the ADK, or any of its agents, employees, officers, instructors, guides, directors, trip leaders and/or members.

I understand that negligence means a failure to do an act which a reasonably careful person would do, or the doing of an act which a reasonably careful person would not do, under the same circumstances, to protect another from injury or death.

I agree to be solely responsible for my own safety and to take every precaution to provide for my own safety and well-being while participating in the outdoor recreational activities of the ADK.

I knowingly assume the following risks, which include but are not limited to, the risk of personal injuries or death, which may occur during participation in the above-named trip and the outdoor recreation or sports activities associated with said trip, including the potential negligence of the trip leader(s).

	PRINT FULL NAME	SIGNATURE	EMERGENCY PHONE	ADK MEMBER
1				Yes No
2				Yes No
3				Yes No
4				Yes No
5				Yes No
6				Yes No
7				Yes No
8				Yes No
9				Yes No
10				Yes No
11				Yes No
12				Yes No
13				Yes No
14				Yes No

IF UNDER 18 YEARS OF AGE, A PARENT OR GUARDIAN MUST READ AND SIGN BELOW: I am the legal guardian of the above minor and have read the above RELEASE. I hereby consent to the terms of the RELEASE on behalf of the above-named minor, and give my consent to the participation of the above-named minor in the outdoor recreational activities of the ADK and I hereby give my consent to the participation of the above-named minor in all the activities of the ADK on the terms stated above.

	PRINT GUARDIAN NAME	GUARDIAN SIGNATURE	EMERGENCY PHONE	ADK MEMBER
1				Yes No
2				Yes No

	PRINT FULL NAME	SIGNATURE	EMERGENCY PHONE	ADK MEMBER
15				Yes No
16				Yes No
17				Yes No
18				Yes No
19				Yes No
20				Yes No
21				Yes No
22				Yes No
23				Yes No
24				Yes No
25				Yes No
26				Yes No
27				Yes No
28				Yes No
29				Yes No
30				Yes No
31				Yes No
32				Yes No
33				Yes No
34				Yes No
35				Yes No
36				Yes No
37				Yes No
38				Yes No
39				Yes No
40				Yes No