

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

TRIP _____ DATE _____
TRIP LEADERS _____ 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 often rigorous and present many risks that could result in illness, personal injury, 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 any illness, personal injury or injuries, and/or death which may occur as a result of participation in the above-named trip and 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 any illness, personal injury or injuries, and/or wrongful death suffered as a result of participation in the above-named trip or activity and any 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 illness, 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 illness, personal injury or injuries or death, which may occur as a result of participation in the above-named trip and recreation or sports activities associated with said trip, including the potential negligence of the trip leader(s).

ADK-NFC Outings Policies and Procedures June 2021

1. Participants should call the leader and register in advance.
2. At the beginning of the outing, the leader must screen all participants and themselves with the following questions. Anyone who answers “yes” to any of these should not participant in the outing:
 - a. Do you currently have any symptoms of a respiratory infection (cough, fever, sore throat, shortness of breath, or loss of taste/smell)?
 - b. Have you had any of the above symptoms in the past 14 days?
 - c. Have you tested positive for COVID-19 in the past 14 days?
3. At the beginning of the outing, the leader must verify that all participants have hand sanitizer and face masks. Masks are not required for fully vaccinated individuals except where required by federal, state, local, tribal or territorial laws, rules and regulations, including local business and workplace guidance. Fully vaccinated individuals still need to carry a mask on outings for use if needed.
4. Updated liability forms must be signed by all participants. Contact information will be shared with government contact tracers when requested.

	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				
12				
13				
14				
15				
16				
17				

IF UNDER 18 YEARS OF AGE, A PARENT OR GUARDIAN MUST READ AND SIGN BELOW: I am the legal guardian of the above minor (please circle name) 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
				YES NO
				YES NO