**Assumption of Risk, Waiver of Claims, Release and Indemnity**

**Organization Name**: Little Woodland Adventures Forest School

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Name of Participant and Parent /Guardian if a minor)

In consideration of my child’s enrolment application acceptance and permission granted to participate in any way in the Little Woodland Adventures Forest School, related events and activities, and use of equipment, I the undersigned, acknowledge, appreciate, and agree that:

1. I knowingly and freely assume all such risks, both known and unknown, and assume full responsibility for my child’s participation in the said Forest School program.

I acknowledge that my child will be: \* using tools including but not limited to: mallets, bow saws, hand drills, whittling knives, hand saws, hatchets, shears, and loppers. \* ﬁnding, lifting, carrying, lugging, positioning, and creating with the natural materials found within the environment with potential exposure to insect stings, animal waste, poisonous plants or allergenic pollens \* learning to tie knots and use ropes to access inclines, swing from branches, create slack lines, ladders, and zip lines. \* pond dipping for aquatic creatures \* using logs as den building materials, climbing apparatus and balancing beams \* ﬁre building, tending, and cooking over an open ﬁre 2. I, for myself, my child and on behalf of my heirs, executors, administrators, successors, assigns, personal representatives and next of kin hereby release, waiver, indemnify, and hold forever harmless Little Woodland Adventures, it’s ofﬁcers, elected and appointed ofﬁcials, agents and/or all of it’s employees, members, servants, contractors and all other associations, sanctioning bodies and sponsoring companies, other participants, advertisers, and, if applicable, owners and lessors of premises used to conduct the program (RELEASEES), successors and assigns, of and from all claims, demands, losses, damages, costs, expenses, actions and causes of action, whether as in law or equity, arising out of or related to any INJURY, DISABILITY , DEATH, LOSS OR DAMAGE, to myself, my child or loss or damage to person or property however caused, arising or to arise by reason of my child’s participation in Little Woodland Adventures Forest School, to the fullest extent of the law, whether as spectator, participant, or otherwise; whether prior to, during or subsequent to his/her participation in Little Woodland Adventures Forest School program not withstanding that the same may have been contribute to or occasioned by the negligence of the aforesaid.

3. I further hereby undertake to hold and save harmless, and agree to indemnify all of the aforesaid from and against any and all liability incurred by any or all of them arising as a result of, or in any way connected with, my child’s participation in the said Little Woodland Adventures Forest School.

I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement. I warrant that my child is physically ﬁt to participate in the Little Woodland Adventures Forest School program. I hereby understand that my child’s permission to participate in the Little Woodland Adventures Forest School program may be revoked if he/she does not follow the code of conduct, instructions, and regulations set forth by the organizers and educators of Little Woodland Adventures Forest School to the point that the behavior is deemed to be unsafe or unmanageable with regards to themselves or others.

IN WITNESS WHEREOF, this waiver, assumption of risk, release and indemnity form has been

duly executed at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on this\_\_\_\_\_\_\_\_\_\_\_ day of\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_\_\_\_.

(city, town) (day of month) (month) (year)

Name of Participant: (please print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Parent/Guardian: (please Print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent/Guardian:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Witness: (please print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Witness: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_