

Waiver and Release from Liability—*Minor* Participant

In consideration of being allowed to operate/ride off-road vehicles on premises owned, leased, or occupied by *Majestic Kamp & Lost Trails, Inc.*, and any related events and activities, and intending to be legally bound, the undersigned:

1. Agrees that prior parents or legal guardian(s) will instruct the minor participant that prior to participating he or she should inspect the facilities and equipment to be used, and if the operator/rider believes anything is unsafe, they will immediately advise the management of Majestic Kamp & Lost Trails, Inc. of such condition(s) and refuse to operate/ride.
2. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions, or negligence of others, the rules of play, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
3. Assume all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.
4. Release, waive, discharge and covenant not to sue Majestic Kamp & Lost Trails, Inc., its administrators, directors, agents, officers, employees, and if applicable, owners and lessors of premises, all of whom are hereinafter referred to as "releasees," from demands, losses, or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or part by negligence of the release or otherwise.

THE UNDERSIGNED HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT THEY HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT VOLUNTARILY.

IN WITNESS WHEREOF, and intending to be legally bound, the undersigned have hereunto set their hands, this **date** of: _____

Date: (Month/Day/Year)

Print Minor Name

Signature of Minor Participant

Father's Printed Name

Father's Signature

Mother's Printed Name

Mother's Signature

Address

City

State

Zip

-----**Office Use only**-----

\$20 Day Ride (15 yrs & up)

\$40 (2-Day Ride)

\$10 Day Ride (under 15 years old)

\$20 (2-Day Ride) Under 15 yrs old

Other _____

Received by: _____