Severson Dells and the Forest Preserves of Winnebago County are committed to conducting their environmental education programs, activities and events (programs) in a safe manner and holds the safety of participants in high regard. The Forest Preserves continually strive to reduce risks and insists that all participants follow safety rules and instructions that are designed to protect the participants’ safety. However, participants and parents/guardians of minors registering for this program must recognize that there is an inherent risk of injury when choosing to participate in recreational programs.

I understand I am solely responsible for determining if I or my minor child/ward is physically fit and/or adequately skilled for the activities contemplated by this agreement. It is always advisable to consult a physician before undertaking any physical activity.

**WARNING OF RISK**

Environmental education programs are intended to connect participants with the natural world and are often conducted in outdoor natural areas. Despite careful and proper preparation, there is still a risk of serious injury when participating in any environmental education activity. All hazards and dangers cannot be foreseen. In this regard, it is impossible for the District to guarantee absolute safety.

**WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK**

I recognize and acknowledge that there are certain risks of physical injury to participants in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in this program/activity against the District, including its officials, agents, volunteers and employees.

**PHOTO RELEASE**

I consent to and authorize the use and reproduction by Severson Dells and the Forest Preserves of Winnebago County of any and all photographs and any other audiovisual materials taken of me or the minor(s) listed below for promotional printed material, educational activities and exhibitions or for any other use for the benefit of the program.

___ Yes ___ NO

I have read and fully understand the above important information, warning of risk, assumption of risk, waiver and release of all claims and photo release. If registering on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

Participant’s Name: __________________________________________

(Please print)                                                                                     (18 years or older or Parent/Guardian)

Participant’s Signature: ____________________________________________________________________________

Program Name: __________________________________________ Date: __________________

PARTICIPATION WILL BE DENIED
If the signature of adult participant or parent/guardian and date are not on this waiver.

Please list the adults who are permitted to drop off and/or pick up your child:

Name: __________________________________________ relationship: __________________________________________

Name: __________________________________________ relationship: __________________________________________

Name: __________________________________________ relationship: __________________________________________

Name: __________________________________________ relationship: __________________________________________