HIGH COUNTRY ADVENTURES, INC. PARENT/GUARDIAN PERMISSION FORM

(This form to be used for minors only)

| I hereby grant permission for my child | ž . | to participate in whitewar | ter rafting, biking | |
|---|-------------------|------------------------------|---------------------|--|
| kayaking, camping, ropes courses, caving, or rock climbing with or at High Country Adventures, Inc. on | | | | |
| date), and I hereby agree as follows: | | | | |
| I fully understand and acknowledge that: (a) risks and dangers exist in my child's use of rafting | | | | |
| biking, kayaking, camping, caving, ropes courses, canoeing equipment, or vehicles and my child's | | | | |
| participation in rafting, biking, kayaking, camping, caving, ropes courses, canoeing activities, or related | | | | |
| transportation; (b) my child's participation in such activities and/or use of such equipment, vehicles, or | | | | |
| transportation may result in injury or illness or death or damage to personal property (c) these risks and | | | | |
| dangers may be caused by other participants, or by accidents, or by the forces of nature or other causes. | | | | |
| Risks and dangers may arise from foreseeable or unforeseeable causes including, but not limited to, selection of trail or river route, water level, weather conditions, risks of falling out of a raft, kayak, or | | | | |
| | | | | |
| canoe, and such other risks, hazards and dang a wilderness, outdoor or recreational environ | | | | |
| dangers. | ment, and (d) I i | nereby accept and assume the | se risks and | |
| I have been advised that my child must wear an approved personal flotation device at all times | | | | |
| while on the water. I affirm that my child will not be under the influence of alcohol or controlled | | | | |
| substance, and will not carry, use, or consume these substances before or during her/his scheduled | | | | |
| activities. Any claims or dispute arising from my child's participation in High Country Adventures, Inc. | | | | |
| activities or use of High Country Adventures, Inc. equipment or vehicles shall be venued in the Polk | | | | |
| County Supreme Court of the State of Tennessee. | | | | |
| My child is in good health and is at or above the minimum age stated in High Country Adventures | | | | |
| Inc. advertising for each activity in which he/she will participate. I understand that strenuous physical | | | | |
| exertion may be required and my child has no known physical disabilities or health problems, which will | | | | |
| present any risk to his/her participation in the activities. I release and agree to indemnify and hold harmless | | | | |
| High Country Adventures, Inc., TVA, The United States of America, SLDC, and the State of Tennessee | | | | |
| from any and all liabilities incident to my minor child's involvement or participation in these programs as | | | | |
| provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF HIGH COUNTRY ADVENTURES | | | | |
| INC., TVA, THE UNITED STATES OF AMERICA, OROA, INC., and THE STATE OF TENNESSEE to | | | | |
| the fullest extent permitted by law. I permit the use of any photos, slides, films, or sketches of him/her | | | | |
| taken during the day's activities for publicity, advertising, promotion or other commercial purpose. The | | | | |
| above agreement shall be binding on my heirs, successors, assigns, administrators and executors. | | | | |
| I HAVE READ THE ABOVE AND BY SIGNING IT AGREE. IT IS MY INTENTION TO | | | | |
| GRANT PERMISSION FOR MY CHILD TO PARTICIPATE IN HIGH COUNTRY ADVENTURES | | | | |
| INC. RAFTING, BIKING, KAYAKING, CAMPING, CAVING, ROPES COURSE, OR CANOEING | | | | |
| ACTIVITIES, AND RELATED TRANSPORTATION, AND TO ASSUME AND ACCEPT ALL RISKS | | | | |
| ASSOCIATED THEREWITH. | | | | |
| Group Name (if applicable) | | | | |
| Group Name (ii applicable) | | | | |
| Parents Name (Print) | Signature | | | |
| | | | | |
| Street and Apt. Address: | | 3 | | |
| | | | | |
| City: | State: | Zip: | | |
| Child's Name | | n : | | |
| Child's Name: | Age: | Trip Date: | - | |
| Child's Signature: | | E-MAIL | | |
| THE REPORT OF A SECURITION OF THE PROPERTY OF | | - 1714 x LL/ | | |

DO NOT LOSE-PLEASE GIVE COMPLETED FORM TO YOUR GROUP LEADER