

## **RELEASE OF CLAIMS**

(The words “I”, “me”, or “my” refer to the person who signs below. The words “you” or “your” refer to The Country School, 341 Opening Hill Road, Madison, CT)

I, the person signing below, acting on my own behalf and/or that of each person whose name is listed below (my “minor child”), make the following statements and agreements with full knowledge that you will rely on them.

- I ask that I and/or my minor child be granted permission to use your ropes course.
- In consideration of you allowing my use and/or that of my minor child of your ropes course, I make the following agreements with you:
  - I agree to release you, your officers and trustees from any liability, claim, or expense associated with or arising from such use.
  - I further agree not to sue you, your officers and trustees for any injury, illness, or loss of any type, including those allegedly caused by your negligence.
  - I further agree to indemnify and hold you harmless for any claim brought by me, my child, or any other person for a claim related to such use by me or my minor child.
- I understand that I have responsibility for my safety and/or that of my minor child. I agree that I will make my own assessment about my ability, or that of any minor child of mine, to safely participate in such activity before any such activity is engaged in. I understand there may be risks associated with such activities and I agree to assume all of the risks of such activities (whether inherent or not).

I agree that if any provision of this document is deemed unlawful or unenforceable such provision shall be deemed severable and shall be stricken from this document without any effect on the enforceability of the remaining provisions.

**This document is intended to be a release of all claims and a waiver of all rights you, or your minor child, have, or may have, against The Country School, Madison, CT, relating to or arising from use of the school’s ropes course. Before you sign this document you should read it carefully and make sure you understand it. Do not sign this document if there is anything in it you do not understand.**

I have read and understand this document and I am signing it of my own free will.

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Printed Name

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Date

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Signature

On the lines below, please print the name(s) of any minor child belonging to you who you want to use the Ropes Course.

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Child's Name

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Child's Name

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Child's Name

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Child's Name

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Child's Name

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Child's Name

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Child's Name

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Child's Name