## PARTICIPANT AGREEMENT, RELEASE AND ASSUMPTION OF RISK

In consideration of the services of Rock - About Inc, their agents, owners, officers, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as "RA"), I hereby agree to release, indemnify, and discharge RA, on behalf of myself, my spouse, my children, my parents, my heirs, assigns, personal representative and estate as follows:

I acknowledge that my participation in hiking and rock climbing activities entails known and unanticipated risks that could result 1. in physical or emotional injury, paralysis, death, or damage to myself, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.

The risks include, among other things: the hazards of walking on uneven terrain and slips and falls; being struck by rock fall, icefall or other objects dislodged or thrown from above; the use and potential or actual failure of climbing ropes and equipment; rope burns; pinches, scrapes, twists and jolts that could result in scratches, bruises, sprains, lacerations, fractures, concussions, or even more severe life threatening hazards; the risks of falling off the rock, mountain or into a crevasse; exposure to potentially dangerous wild animals, insect bites, and hazardous plant life; travel in remote areas with poor or no access to emergency and/or medical services; the negligence of other participants or persons who may be present; accidents or illness can occur in remote places without medical facilities and emergency treatment or other services rendered; consumption of food or drink; and improper lifting or carrying; my own physical condition, and the physical exertion associated with this activity.

Furthermore, RA employees have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's fitness or abilities. They might misjudge the weather or other environmental conditions. They may give incomplete warnings or instructions, and the equipment being used might malfunction.

- I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is 2. purely voluntary, and I elect to participate in spite of the risks.
- I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless RA from any and all claims, demands, 3. or causes of action, which are in any way connected with my participation in this activity or my use of RA's equipment or facilities, including any such claims which allege negligent acts or omissions of RA.
- 4. Should RA or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
- I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to 5. bear the costs of such injury or damage myself. I further certify that I am willing to assume the risk of any medical or physical condition I may have.
- In the event that I file a lawsuit against RA, I agree to do so solely in the state of Texas, and I further agree that the substantive 6. law of that state shall apply in that action without regard to the conflict of law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining document shall remain in full force and effect.

By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against RA on the basis of any claim from which I have released them herein.

I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.

Print Name			Phone Number	
Address			City	
State	Zip	Email		
Signature of Participant			Date	
PARENT'S OR G	GUARDIAN'S ADDITION	AL INDEMNIFICATION (Must be o	completed for participants under the age of 18)	
facilities, I furth	ner agree to indemnify		RA to participate in its activities and to use its equipment and and all claims which are brought by, or on behalf of Minor, and or.	
Parent or Guar	dian:			
Print Name:			Date:	