

Nurture Through Nature
RELEASE AND ASSUMPTION OF RISK

I, _____, of _____,
(Print Name) (Address)

a Nurture Through Nature participant being of legal age, acknowledge, declare and agree as follows:

1. That I have voluntarily agreed to participate in

_____,
Name of Retreat
to be held on _____, 20__ sponsored by Nurture Through Nature and in consideration of being permitted to participate in this program, do voluntarily execute this "Release and Assumption of Risk" on behalf of myself, my heirs, and next-of-kin, my personal representatives and my estate.

2. That Nurture Through Nature (hereinafter referred to as "NTN") has apprised me that there may be dangers and hazards inherent to participants in this program and that I personally recognize and appreciate that such dangers and hazards exist. I understand that NTN is not a guardian of my safety and I accept and assume full responsibility for all harm and injury, of every nature, including death, which may occur to me or which I may suffer, and for all damages or loss to any personal property owned by me, while I am participating in these programs and during all travel and transportation to, from, and within the United States or any other location, and, in furtherance thereof, I agree to indemnify and hold harmless NTN, its independent consultants, interns, volunteers, employees and agents from and against any and all claims, demands, actions or causes of action, on account of damage or loss to my personal property, my personal injury, or death, which may occur or result directly or indirectly from my participation in these programs, and not as a direct result of any negligent act of NTN, its independent consultants, interns, volunteers, employees or agents.

I am also aware that some of the program in which I am registered may be conducted in isolated wilderness areas with no mechanical transportation, and no roads, telephones, or outside communication facilities available for a part of the program. In case of emergency, if it becomes necessary to evacuate me, I agree to pay all costs associated therewith.

3. I declare that I am able to physically withstand and cope with the indicated rigors of these programs, with or without an accommodation. If an accommodation is needed, I will contact the group leader.

4. I request that this "Release and Assumption of Risk" be construed and interpreted pursuant to the laws of the State of Maine, and if any portion thereof is held invalid, I request the remainder continue in full force and effect.

5. I declare that I completely understand and have fully informed myself of the terms and conditions of this "Release and Assumption of Risk" by having read it, or having it read to me, before signing.

Assented and agreed to on this _____ day of _____, 20__.

Signature Witness