

**WAIVER OF LIABILITY ⌘ MEDICAL TREATMENT AUTHORIZATION ⌘ TALENT RELEASE
MEDICAL CONDITIONS DISCLOSURE ⌘ E-MAIL OPT-IN ⌘ EMERGENCY NOTIFICATION**

Field Trip Company Event Stunt Camp Party Paintball TV Shoot After-School Other

In consideration of being allowed to enter Stunt Ranch, and/or participate in any activity at this facility, the undersigned, on his or her behalf, and on behalf of the participant(s) identified below, acknowledges and agrees to the following conditions:

_____ I am aware that there are inherent risks associated with participation in Stunt Ranch activities, and I, on behalf of myself and the participant(s) named below, knowingly and freely assume all such risk, both known and unknown, including those that may arise out of the negligence of other participants; and, I, for myself and the participant(s) named below, and our respective heirs, assigns, administrators, personal representatives, and next of kin, hereby release and hold harmless the following entities: Stunt Ranch Events LLC, Stunt Ranch Properties LLC, Wolf Stuntworks LLC, Whole School Management LLC, and their affiliates, officers, members, agents, employees, other participants, and sponsoring agencies from and against any and all claims, injuries, liabilities or damages arising out of or related to our participation in any and all Stunt Ranch programs, activities, parties, and/or the use of the property.

_____ I understand that Stunt Ranch personnel may photograph and or videotape my and/or my child's participation. On behalf of myself and my child/children, I grant Stunt Ranch and its contractors and successors unlimited use of all such recordings, and the ideas and concepts contained therein, with no obligation to me. Such recordings are the sole property of Stunt Ranch, but will be made available to me upon request, and may be found at "I Want Those Pictures . com"

_____ I represent that I am the parent or legal guardian of the participant(s) named below, or I have obtained permission from the parent/legal guardian of the participant(s) named below to execute this agreement on their behalf. I agree that the participant(s) named below and I shall comply with all stated and customary terms, posted safety signs, rules, and verbal instructions as conditions for participation in any party and/or program at Stunt Ranch. If observe any hazard during our participation, I will bring it to the attention of the nearest Stunt Ranch staff member immediately.

_____ In the event that I, or the minor's named below, are injured and are either physically or legally unable to consent to medical aid, I grant full legal permission to Stunt Ranch personnel to authorize or render any medical treatment on my behalf or on behalf of the participant named below, and I warrant that I am authorized to grant such permission.

_____ I have read and understand this document and acknowledge that it is a legally binding document. I agree that I'm here to have fun, and I consent to receive super cool emails about upcoming activities at Stunt Ranch that I will really regret missing out on if I don't find out about them.

Adult/Guardian (signature) _____ **Date:** ___/___/___

Print Name: _____ **Birthday Date:** ___/___/___

Street Address, City, State: _____

Phone: (____) ____ - ____ **Zip:** _____

Email Address: _____ (please print clearly)

List Medical Conditions / Medications / Drug Allergies: _____

Minor Participant #1 Name _____ **DOB:** ___/___/___

List Medical Conditions / Medications / Drug Allergies:

Minor Participant #2 Name _____ **DOB:** ___/___/___

List Medical Conditions / Medications / Drug Allergies:

IN CASE OF EMERGENCY, Notify:

Name Relationship **Phone** or **Phone**