



ADIRONDACK MOUNTAIN CLUB INC.
814 GOGGINS Rd, LAKE GEORGE NY, 12845-4117
(518) 668-4447

TRIP _____ DATE OF TRIP _____
 TRIP LEADER _____ CHAPTER: SCHENECTADY CHAPTER

RELEASE OF LIABILITY- GROUP FORM

By signing below, I acknowledge that the outdoor recreational activities associated with the above described trip to be conducted by the Adirondack Mountain Club, Inc. (ADK), and/or its chapters are rigorous outdoor sports activities which may involve the risk of personal injury or death:

I hereby agree for myself, all of my family members and heirs, to be effective to the greatest extent permitted by law, to release ADK and any of its employees, officers, directors, members, trip leaders, chapters, or agents from any and all liability claims, losses, and/or damages for personal injuries or death which may occur during participation in the above-named trip and the outdoor recreation activities associated with said trip.

I hereby agree for myself, all my family members and heirs, to be effective to the greatest extent permitted by law, not to sue or make any negligence claim against ADK, or any of its agents, employees, officers, instructors, guides, directors, trip leaders and members for personal injuries or wrongful death suffered as a result of participation in the above named trip or activity.

I intend this release and agreement not to sue to be effective whether or not injury or death results, in whole or in part, from the negligence of the ADK, or any of its agents, employees, officers, instructors, guides, directors, trip leaders and/or members.

I understand that negligence means a failure to do an act which a reasonably careful person would do, or the doing of an act which a reasonably careful person would not do, under the same circumstances, to protect another from injury or death.

I agree to be solely responsible for my own safety and to take every precaution to provide for my own safety and well-being while participating in the outdoor activities of the ADK.

I knowingly assume the following risk, which include but are not limited to, the risk of personal injuries or death, which may occur during participation in the above named trip and the outdoor recreation activities associated with said trip.

If the signer is a minor:

I am the legal guardian of this minor and have read the above RELEASE. I hereby consent to the terms of the RELEASE on behalf of this minor, and give my consent to the participation of this minor in the outdoor recreational activities of the ADK and I hereby give my consent to the participation of this minor in all the activities of the ADK on the terms stated above.

(Note: Suitability of an outing for participation of minors is at the discretion of the trip leader.)

SIGNATURE _____ DATE _____
 SIGNATURE _____ DATE _____
 SIGNATURE _____ DATE _____
 SIGNATURE _____ DATE _____
 SIGNATURE _____ DATE _____
 SIGNATURE _____ DATE _____
 SIGNATURE _____ DATE _____

Trip Leader, please mail the completed waiver form to the following address:
 Walt Hayes, 4 South Court, Scotia, NY 12302

