

ADIRONDACK EXTREME ADVENTURE COURSE LLC. ACKNOWLEDGEMENT AND WAIVER OF RISK

I herby acknowledge that I understand the risk of injuries and physical demands which are associated with my participation in the Adirondack Extreme Adventure Course, LLC. I understand that this is an elevated course with many challenges which are also called "games". I understand that I will be in a safety harness which I am required to wear for the entire course and I will have two safety lines which I will be required to fasten and unfasten to the main safety lines as I make my way along the course. I agree that at all times I will keep at least one safety line attached to the main safety line.

I understand that I need physical strength and stamina to participate in the Adirondack Extreme Adventure Course LLC. I understand that if I lack the strength to participate in the course I am putting myself at risk for injury. I agree that I will call for help if I am in need of assistance. I agree that if it is determined by a staff member that I am unfit to continue participation in the course because I lack the physical strength to complete the course, because I am not following instructions or for any other valid reason I will be asked to leave the course. I understand that I will not be entitled to a refund of fees paid.

I understand that the safety lines which will be attached to my harness are approximately 28 inches long and that if I were to lose my footing along the course I could fall the length of the safety line. I understand that if I fall and am unable to easily get back on the course I will call for help and wait for a staff member to assist me in my descent from the course.

I understand that I could sustain a physical injury as a result of my participation in the Adirondack Extreme Adventure Course, LLC. I will be in a natural setting where I could fall, suffer heat stroke, be struck by a tree or be injured as a result of coming in contact with elements of the course. Understanding these risks I choose to participate in the Adirondack Extreme Adventure Course, LLC.

I acknowledge that Adirondack Extreme Adventure Course, LLC is not responsible for any personal items, left in the care of staff or not, which are lost, stolen or damaged.

I agree to cover the cost repair or replacement if I damage or lose any of the loaned equipment.

I agree that Adirondack Extreme Adventure Course, LLC and TreeGo Canada and its licensees are allowed to use any video images or photographs in which I appear for advertising.

I have read and understand all the terms and conditions stated in this form and voluntarily agree to take part in activities. Participants under 16 must have the signature of an adult.

I will follow these rules:

- 1. I will only participate if I am physically fit and am not under the influence of alcohol or medication.
- 2. I will participate in the demonstration course.
- 3. I will follow the instructions of the staff.
- 4. I will keep at least one of my safety lines attached to the main safety line at all times.
- 5. If I fall during the course I will call for help and wait for a staff member to assist me.
- 6. I will not walk under the course. I will stay on the marked trails when I am on the ground.
- 7. I will wear appropriate footwear, not sandals.
- 8. Participants under 16 must stay with their adult companion at all times. They can not complete the course if their adult companion stops the course.
- 9. Long hair must be tied back.
- 10. No clothing may be tied around the waist or otherwise be too loose that it could become caught on the equipment.
- 11. All supplied equipment will be returned immediately after its use. Other customers are waiting to use it.
- 12. All participants should make a stop at the restrooms before going through the course.

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Dated this	day of	, 20	
1)	Day) day of (Month)	(Year)	
Participant Signature	(Print Participant S	treet)	Signature of Witness
	(Print Participant S	(Print Participant State/Prov.)	
Print Participant Name	(Print Participant Z	ip Code)	Print Witness Name
of the participant noted above this Release shall be effective Participant and I willingly ac	firm that I am the full age of ninetee e, have read and understood this Rel e and binding upon my heirs, next of cept all the risks of the Participant's ibility of personal injury, death, pro	ease Agreement pr f kin, executors, ad Activities including	ior to signing it and agree that ministrators, and assigns. The ag without limitation the risks
Signature of Parent or Gurad	ian Print Parent Name	or Guardian	Print Participant Name