## ADIRONDACK MOUNTAIN CLUB, INC. 814 Goggins Rd, Lake George, NY 12845-4117 (518) 668-4447

(518) 668-4447	
TRIP	DATE of TRIP
TRIP LEADER	CHAPTER
RELEASE OF LIABILITY FOR MINOR	
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 injuries 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, governors, 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, governors, trip leaders and members for personal injuries or wrongful death suffered as a result of participation in the above-named trip or activity.	
death results, in whole or in part, fror	not to sue to be effective whether or not the injury or means the negligence of the ADK, or any of its agents, es, directors, governors, 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 recreational activities of the ADK.	
I knowingly assume the following risks, 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.	
SIGNATURE OF MINOR	Date
I am the legal guardian of the above minor and have read the above RELEASE. I hereby consent to the terms of the RELEASE on behalf of the above-named minor, and give my	

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

consent to the participation of the above-named minor in the outdoor recreational activities of the ADK and I hereby give my consent to the participation of the above-named minor in

all the activities of the ADK on the terms stated above.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_

Trip Leader, please mail the completed waiver form either to the appropriate Committee Chair or to the Chapter mailing address which is: GENESEE VALLEY CHAPTER of ADK, P.O. Box 22822, Rochester, NY 14692-2822