RELEASE OF LIABILITY -READ BEFORE SIGNING

In consideration of being allowed to participate in any way in the Bogue Chitto Tubing Center, its related events and activities, I, the undersigned, acknowledge, appreciate and agree that:

1 The risk of injury from activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular skills, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,

2 I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,

3 I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the Company immediately; and,

4 I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY AND HOLD HARMLESS the Bogue Chitto Tubing Center, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used for the activity ("Releasees"), with respect to any and all injury, disability, death, or loss or damage to person or property associated with my presence or participation, whether arising from the negligence of the releasees or otherwise, to the fullest extent permitted by law.

I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.

TODAY'S DATE_____ Life Jacket

Name_____Age____Emergency #_____ Yes_____No_____

Name_____Age____Emergency #_____ Yes_____No_____

Name_____Age____Emergency #_____ Yes_____No_____

Name_____Age____Emergency #_____ Yes_____No_____

Name_____Age____Emergency #_____ Yes_____No_____

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Name_____Age____Emergency #_____ Yes_____No_____

Name_____Age____Emergency #_____ Yes_____No_____