	AEDICAN CANOE ACCO	14 TION 44 F 14 DE	SCHIP EODA	
	MERICAN CANOE ASSOC ACA-insured activities must be ACA			es (choose one):
I am currently an ACA member. My member (Check here if renewing with this form □)	number appears below.	I would like a o (Under 18, or u	one-year Student Member ander 23 with copy of st	ership for \$25 cudent ID)
I would like an ACA Introductory Membership (Six month membership with benefits, included)			ACA Event Membership nembership, no member	
As a new or renewing ACA member, my R  Canoeroots	Rapid Media magazine choice is: Rapid □	Kayak Angler □	Print □ D  Adventure	ligital □ Kayak □
AMERICAN CAN	OE ASSOCIATION MINO			•
READ BEFORE SIGNING				
IN CONSIDERATION of being permitted to participate in any way in the Rocky Mountain Sea Kayak Club and the American Canoe Association, Inc. sports and recreation program and related activities ("Activities") I, for myself, my personal representatives, assigns, heirs, and next of kin:				
1. ACKNOWLEDGE, agree, and represent that I understand the nature of Paddlesports and related Activities and that I am qualified, in good health, in proper physical condition to participate in such Activity and willingly agree to comply with the stated and customary terms and conditions of participation. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity. If I decide to leave early and not complete the trip as planned, I assume all risks inherent in my decision to leave.				
2. FULLY UNDERSTAND that: (a) Paddlesports and related ACTIVITIES INVOLVE RISKS AND DANGERS OF DAMAGE TO PERSONAL PROPERTY AND SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation or that of the minor in the Activity.				
3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE American Canoe Association, Inc., its Paddle America Clubs, affiliated clubs and organizational affiliates, their respective ACA certified instructors, certified instructor trainers, and certified instructor trainer educators, administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, INJURIES, DAMAGE TO PROPERTY, OR OTHER DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.				
MINOR PARTICIPANT: I, THE MINOR PARTICIPANT: I, THE MINOR PARTICIPANT IN THE MINOR PARTICIPANT I	NG IT AND HAVE SIGNED IT FRE JNCONDITIONAL RELEASE OF AL	ELY AND WITHOUT A LL LIABILITY TO THE	NY INDUCEMENT OR GREATEST EXTENT A	ASSURANCE OF ANY NATURE LLOWED BY LAW AND AGREE
Minor Name (print)		Minor Date of Birth		ACA # (if any)
Minor Street		OI BII (II	Minor	(II dily)
Address	Minor	Minor	Phone Minor	
City	State	Zip	Email	
Date Minor Signature				
PARENT OR GUARDIAN: I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF PADDLESPORTS AND RELATED ACTIVITIES AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.				
Parent/Guardian Name (print)		Parent/G ACA #	uardian (if any)	
D/C Charact Address		D./		
P/G City	P/G State P/G			
Date	Parent / Guardian Signat	ure		

MINOR WAIVER
REVISED 08/13

Sponsoring Org. Rocky Mountain Sea Kayak Club Activity Date

Activity Description