

PARENT/GUARDIAN PERMISSION FORM

(This form to be used for minors only.)

I hereby grant permission for my child, _____, to participate in outdoor activities that include swimming, hiking, rope swings, fishing, biking, kayaking, camping or canoeing at SALTSBURG RIVER AND TRAIL on (date) _____, and I hereby agree as follows:

I fully understand and acknowledge that: (a) risks and dangers exist in my child's use of swimming, fishing, biking, kayaking, camping or canoeing equipment and my child's transportation to/from and participation in swimming, fishing, biking, kayaking, camping or canoeing activities; (b) my child's participation in such activities and/or use of such equipment may result in injury or illness or death or damage to personal property; (c) these risks and damages may be caused by other participants, or by accidents, or by the forces of nature or other causes. Risks and dangers may arise from foreseeable or unforeseeable causes including, but not limited to, selection of trail or river route, water level, weather conditions, risks of falling out of a raft, kayak, or canoe, getting lost, falling from a bicycle, wildlife and such other risks, hazards and dangers that are integral to recreational activities that take place in a wilderness, outdoor or recreational environment; and (d) I hereby accept and assume these risks and dangers.

I understand that my child will be under supervision and must wear an approved personal flotation device at all times while on the water. I affirm that my child will not be under the influence of alcohol or controlled substance, and will not carry, use or consume these substances before or during his/her scheduled activities. Any claims of dispute arising from my child's participation in SALTSBURG RIVER AND TRAIL'S activities or use of SALTSBURG RIVER AND TRAIL'S equipment shall be venued in the Indiana County Supreme Court of the Commonwealth of Pennsylvania.

I understand that strenuous physical exertion may be required and my child has no known physical disabilities or health problems, which will present any risk to his/her participation in the activities. I permit the use of any photos, slides, films, or sketches of him/her taken during the day's activities for publicity, advertising, promotion or other commercial purpose. The above agreement shall be binding on my heirs, successors, assigns, administrators and executors.

I HAVE READ THE ABOVE AND BY SIGNING IT AGREE. IT IS MY INTENTION TO GRANT PERMISSION FOR MY CHILD TO PARTICIPATE IN SALTSBURG RIVER AND TRAIL'S HIKING, FISHING, SWIMMING, BIKING, KAYAKING, CAMPING, OR CANOEING ACTIVITIES, AND TO ASSUME AND ACCEPT ALL RISKS ASSOCIATED THEREWITH.

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| _____ | _____ | |
| Group Name (if applicable) | Date | |
| _____ | _____ | |
| Parents Name or Adult assuming responsibility (printed) | Signature | |
| _____ | _____ | |
| Street Address | Phone | |
| _____ | _____ | |
| City | State | Zip Code |
| _____ | _____ | _____ |
| Child's Name | Age | Trip Date |
| _____ | _____ | _____ |
| Emergency Contact Name | Phone | |
| _____ | _____ | |

DO NOT LOSE – PLEASE GIVE COMPLETED FORM TO YOUR GROUP LEADER