



Quiet Heart
Wilderness School

2022 RELEASE, INDEMNIFICATION, AND WAIVER FORM
THIS IS A LEGAL RELEASE -- PLEASE READ IT CAREFULLY

I, the undersigned, hereby acknowledge that I have been advised and fully understand that certain elements of danger are inherent in the activities sponsored by Quiet Heart Wilderness School, which are beyond the control of the instructors, agents, officers, students, employees of Quiet Heart Wilderness School, and all our program locations, including the Edmonds Unitarian Universalist Congregation (EUUC), and that participation in any program activities may entail unavoidable risk of personal injury, death, and loss of or damage to property. These risks include, but are not limited to, 1) insect and animal bites and stings, 2) forces of nature such as but not limited to lightning, and unexpected extreme weather conditions, 3) any hazard present in the wilderness, such as but not limited to low lying branches, sticks, sharp objects, and slippery surfaces, and 4) contagious sickness or disease.

I hereby assume all risks of injury and death to myself (or my child) and loss of or damage to property arising out of my (or my child's) participation in such activity and I agree to indemnify and hold harmless Quiet Heart Wilderness School, its instructors, agents, officers, and employees, and/or EUUC from and against all claims arising from any occurrence causing damage or injury to myself (or my child) or to any party participating in said event or any third party injured as a result of my (or my child's) actions. I further agree to repair or reimburse Quiet Heart Wilderness School and/or the property owners of our program locations, including EUUC, for any and all damages that I (or my child) cause Quiet Heart Wilderness School property or the program location property, including EUUC. I further agree, on behalf of myself, my child, and any and all legal successors and proxies, to release, and hereby do release, waive, and covenant not to sue, both Quiet Heart Wilderness School and the property owners of our program locations, including EUUC.

Provided parents or emergency contacts cannot be reached within reasonable time, I hereby voluntarily consent to the rendering of such care, including diagnostic procedures, surgical and medical treatment, by authorized members of the hospital staff or their designees, as may in their professional judgment be necessary. I hereby acknowledge that no guarantees have been made to me as to the effect of such examination or treatment on child's condition. I acknowledge that I am responsible for all reasonable charges in connection with care and treatment rendered during this period.

I have read the foregoing and understand the terms and conditions of this Release, Indemnification and Waiver and I agree to subscribe to them.

Participant's Name(s): _____ Date(s) of Birth: _____
(please print)

Parent/Guardian: _____ Signature: _____
(please print)

Executed at _____, Washington, this _____ day of _____, 20__.

Please initial the following:

_____ I have read and understand Quiet Heart Wilderness School's policies and procedures to slow the spread of coronavirus and/or COVID-19, and I am comfortable participating in Quiet Heart's programs. <http://quietheart.org/coronavirus/>