ACKNOWLEDGMENT OF RISK & ACCEPTANCE OF RESPONSIBILITY FORM

This document affects your legal rights. You should read and understand it before initialing or signing.

In consideration of the services provided by employees, volunteers and all other persons or entities ac	, its principals, officers, directors, agents,
referred to hereafter as "the provider," I hereby covenant	
	JTY OF PARTICIPANTS
the provider as set forth at Section 37-47-401, M.C.A., et	asonably prudent person when engaging in the recreational activity conducted by a seq. I shall not willfully or negligently engage in any type of conduct which abarking on any self-initiated aspect of this activity, I must inform the outfitter, as and must receive their permission Please initial here.
I understand and acknowledge that the activity bears certain known and unanticipated inherent risks that participants regardless of all feasible safety measures take weather changes, rain, snow, wind, hail, lightning, my pl hypothermia, hyperthermia, high altitude sickness, dehyd and domestic animals, distance and inaccessibility to imm dangerous river conditions, falling from watercraft, and nillness or disease, physical or mental, or damage to myse I, being aware that this activity entails risks or expressly agree, covenant and promise to accept and assumyself or to my property arising from participation in thi attorneys' fees and costs, if they are injured or otherwise	in which I am about to voluntarily engage as a participant and/or volunteer contribute to the unique character of this activity and may be hazardous to en by the provider. These include, but are not limited to, drowning, sudden hysical condition and physical exertion for which I am not prepared, dration, heat stroke, motion sickness, snake bite, bees and other insects, wild mediate medical attention, travel over rough terrain, falling rocks, turbulent and my or another participant's acts or omissions which could result in injury, death, lf or to my property. Injuries to myself and a risk or injury to third parties as a result of my actions, ame all responsibility and risk for injury, death, illness, disease, or damage to a activity. I also agree to pay for any damages caused to others, including damaged due to any negligent actions on my part. My participation in this cipate, and I elect to participate in spite of the known and unanticipated risks.
	Please initial here.
directors, officers, agents and employees, and that it cann	is the entire agreement between myself and the provider, its principals, not be modified or changed in any way by the representations or statements of teer or any other person or entity acting in any capacity on behalf of the
My signature below and initials above indicate bound by its terms.	that I have read this entire document, understand it completel, and agree to be
Signature of participant	Print Name
Signature of parent or guardian (If participant is under the age of 18)	Print Name
Data	