

# Hunterdon Hiking Club Liability Waiver and Sign-In Sheet

## IMPORTANT – PLEASE READ THE FOLLOWING BEFORE YOU SIGN

- **Liability Waiver:** I hereby waive and release all rights and claims for damages against the Hunterdon Hiking Club (HHC), and its officers, members and families personally for all injuries which may be sustained by me or any family member(s) while participating in the program listed below. I understand the content of the program and the risks of personal injury herein. I further agree to indemnify and hold harmless the Hunterdon Hiking Club and each of its members from any claim for loss or damage or injury to myself or any member of my family arising from or in connection with any participation in the program listed below.
- **Medical Assistance:** I understand there may be NO medical help on hikes. I give my permission for the HHC and its program participants to admit me or my family member(s) for EMERGENCY medical treatment that may become necessary as a result of a medical emergency during this program. I will tell a leader if I have any issue that could affect the hike. I will take full responsibility for my own well-being. No one but me is responsible for my safety when I choose to challenge my capabilities or personal health conditions. I take responsibility for having appropriate skills and physical conditioning, equipment and supplies for these activities.
- **Leader:** The activity leader reserves the right to terminate the activity or exclude a hiker if he/she believes the group or an individual's health or safety is in jeopardy or should there be other circumstances such as inclement weather, etc.
- **Transportation:** The hike begins and ends at the designated trailhead. Transportation to and from the trailhead is independently arranged.

**Non-Member fee: The guest/non-member fee is \$2.00.**

Leader: \_\_\_\_\_ ACTIVITY: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINT NAME	SIGNATURE	YOUR CELL PHONE #	EMERGENCY CONTACT
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
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17. _____	_____	_____	_____