## Heart of Vickery Meadow Walk and Community Festival ASSUMPTION OF RISK, RELEASE AND WAIVER FORM

Age:	Minor	Adult	,
Gender:	Male	Female	
involving I include, but paralysis, ligaments, diseases waspects of above every living, to each agree to occondition organizers in the every living the every living to each agree to occondition organizers in the every living th	wany RISKS  at are not limit brain damage muscles, ter which could re my body, ger ant may result ngage in other cause of the cause of	ited to, death, see, serious injury to adons, and other esult in illness sumeral health and varied health in stain an accidentate risks involved varied health in a serious of any and all obtain any any any any any any any any any an	the Heart of Vickery Meadow Walk can be a dangerous activity niderstand that the dangers and risk of participating in the above event rious neck and spinal injuries which may result in complete or partial overtually all internal organs, serious injury to virtually all bones, joints, aspects of the muscular skeletal system, aggravation of underlying ch as a heart attack or stroke, and serious injury or impairment to other wellbeing. I understand that the dangers and risk of participating in the us injury, but in a serious impairment of my future abilities to earn at and recreational activities, and generally to enjoy living. Pation in the above event, I recognize the importance of following rules an injury strates and in the walk. I recognize and acknowledge that I am in good physical condition and do not know of any exable to participate in the walk. I recognize and acknowledge that the insurance that would provide such special insurance coverage for mental injury while participating in the Heart of Vickery Meadow Walk. In this activity and I am voluntarily participating in Heart of Vickery w, I hereby recognize and assume all risks associated with my ight have arising out of this activity, and agree to release and hold defleart House Dallas, their employees, agents, representatives, and ligations, liabilities, claims, demands, costs, and expenses, including and nature whatsoever which may arise by or in connection with my event. The terms hereof serve forever as a release and assumption instrator, assignees, and for all members of my family.  The terms hereof serve forever as a release and assumption instrator, assignees, and for all members of my family.  The terms hereof serve forever as a release and assumption instrator, assignees, and for all members of my family.
			Date
	(print ı	name)	
(Signature)			(Address)

IT IS STRONGLY RECOMMENDED THAT EACH PARTICIPANT IN THIS PROGRAM PURCHASE INSURANCE WHICH COVERS ACCIDENTS, WHICH MAY OCCUR DURING PARTICIPATION IN ACTIVITIES.

If under 18 years of age, Signature of parent or legal guardian