

COMPLETE & RETURN NO LATER THAN JULY 1, 2008

**MULTI-DAY TRIP RELEASE FORM
TRAILS CLUB OF OREGON**

TRIP DESCRIPTION

Location: White Cloud Mountains, Idaho

Activity: **Alpine Wilderness Outing**

Dates: (circle applicable week)

August 5, 2007 - August 12, 2007

August 12, 2007 - August 19, 2007

RECOGNITION OF RISKS

The Trails Club of Oregon was organized in 1915 and currently promotes the enjoyment of outdoor activities such as trail hiking, mountain and rock climbing, skiing, cycling, swimming, camping, and other similar activities involving the out-of-doors. While the club has had an excellent safety record, it is the responsibility of the Trails Club of Oregon to inform you that these activities, although peaceful in nature, can be dangerous and as such can cause severe injury and even death due to conditions and forces which we cannot predict.

Having made you aware of these facts, the Trails Club of Oregon believes you must make your own decision regarding participation in these activities.

DECLARATION OF INTENT

I acknowledge that the Trails Club of Oregon has apprised me of the dangers and hazards, hidden or apparent, in the various activities it sponsors, as outlined above, and I elect to accept such risks and undertake these activities on my own responsibility. My signature below signifies I hereby, for myself, my heirs, and personal representatives, release and forever discharge the Trails Club of Oregon and its elected officers from any claims or demands for resultant injuries or even death, sustained by me, while participating in a Club sponsored event.

Furthermore, I am financially responsible for the costs of any medical treatment or evacuations, requested by me or others on my behalf, should I become seriously ill or injured.

Signature to accept terms: _____ *Date:* _____

Name of Participant: (please print) _____

Address: _____

Phone: _____ *Trails Club Member: Yes or No*