

CLEVELAND METROPARKS Whiskey Island Paddlefest WAIVER AND RELEASE

Cleveland Metroparks	WAIVER AND RELEASE	Bib #:
Name of Participant:	Birth date:/ Age	e: Gender: M 🗆 F 🗆
Parent/Guardian Name (if applicable):		
Address:		
City, State, Zip:		
	ome)(cell) E-mail	
Event: Whiskey Island Paddlefest, By indicating your acceptance, you covenant as follows:	August 13, 2022 (on behalf of yourself and/or minor child/ward) u	understand, agree, warrant and
potentially hazardous activities, and I unless I am medically able to do so ar appropriate safety equipment, including stand up paddleboarding). I further agpaddleboarding, kayaking, sailing, or sailing, and slacklining in this event in caught in between, entangled, rubbed conditions, traffic, effects of weather, equipment, drowning, and collision wagree for myself (and on behalf of my Commissioners of the Cleveland Metropartners, contractors, and volunteers a volunteers (collectively, the "Released property damage, or loss of any other associated with, my (or my child's/ward of the negligence or carelessness of the my child/ward) Cleveland Metroparks	chowledge stand up paddleboarding, kayaking, sailing should not engage in stand up paddleboarding, kayaking ad properly trained. I agree (on behalf of myself and many but not limited to, United States Coast Guard approprie to refrain from the use of alcohol and any illegal of slacklining. I assume all risks associated with stand up accluding, but not limited to: falls, trips, struck by, structure abraded or jarred by vibration from equipment or many contact with other participants or the natural environment in another craft, person, or object in the water, illness of minor child/ward) to fully release, hold harmless and copolitan Park District, its commissioners, officers, emand Paddle the River, LLC, its officers, employees, ages; (from any and all claims related to any illness, in description which I (or my child/ward) may sustain and ard's) participation in Whiskey Island Paddlefest, ever the Releasees. In the event of injury or illness, I authority to provide first aid. I further give my permission for photo in any print account broadcast, telecast, or company to the provide first aid.	ing, sailing, or slacklining ninor child/ward) to utilize oved lifejacket and a leash (for drugs before or during stand up p paddleboarding, kayaking, ck against, compressed in, aterials, trail and water ment, misuse or failure of s, disease, or infection and lindemnify the Board of Park apployees, agents, sponsors, ents, sponsors, partners and jury, including loss of life, rising out of, or in any way a though liability may arise out the free use of my (my
the laws of the State of Ohio. By indicating your acceptance, you up	es of the Releasees. It is agreed that this document sha nderstand, agree, warrant and covenant for yourself an	nd, if applicable, for your minor

Date: _____

Signature: