



LAS AMIGAS DE LAS LOMAS & LOS AMIGOS PARTICIPANT AGREEMENT, RELEASE & ACKNOWLEDGEMENT OF RISK

I/we, _____, agree to release and discharge Las Amigas de Las Lomas (Las Amigas) and Los Amigos, on behalf of myself, my children, my parents, my heirs, assigns, personal representative and estate as follows:

I/we acknowledge that our/my child has voluntarily chosen to participate in activities and events with Las Amigas and Los Amigos. We fully understand that these activities or events or traveling to them may result in injury, death, and/or property damage. I/we acknowledge and willingly assume all risks and hazards inherent in the activities and events and possible unavailability of immediate medical attention in case of injury, if any. Our/my child's participation in these events is purely voluntary and our/my child elects to do so at our/my child's own risk.

I/we expressly agree and promise to accept and assume all of the risk existing on the activities and events. Our/my child's participation in the activities and events is purely voluntary and our/my child elects to voluntarily participate.

I/we hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Las Amigas and Los Amigos, from any and all claims, demands, or causes of action, which are in any way connected with my/our child's participation in the activities and events. Further, I/we hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Las Amigas or Los Amigos as well as any and all individual members of Las Amigas or Los Amigos, from any and all claims, demands, or causes of action, which are in any way connected with any action of claim of injury of any kind incurred or made by our/my child's guest(s) at an Las Amigas or Los Amigos event.

Should Las Amigas or Los Amigos, or any individual member of Las Amigas or Los Amigos, or anyone acting on their behalf, be required to incur attorney fees and costs to enforce this agreement, I/we agree to indemnify and hold them harmless for all such fees and costs.

I/we certify that our/my child has adequate insurance to cover any injury or damage which may be suffered while participating, or else I/we agree to bear the costs of such injury or damage myself/ourselves. I/we further certify that our/my child has no medical or physical conditions which could interfere with his/her safety in the activities or events, or else I/we am/are willing to assume and bear the costs of all risks that may be created, directly or indirectly, by any such conditions.

By signing this document, I/we acknowledge that I/we may be found by a court of law to have waived my/our right to maintain a claim against Las Amigas or Los Amigos, as well as any and all individual members of Las Amigas or Los Amigos. I/we have had sufficient opportunity to read this entire document. I/we understand it/ and agree to be bound by its terms.

Date:	(Print & Sign Name Clearly)	
Parent's or Guardian's additional indemnification (must be completed for participants under the age of 18). I further agree to indemnify and hold harmless Las Amigas or Los Amigos as well as any and all individual members of Las Amigas or Los Amigos from any and all claims which may or could be brought by, or on behalf of Minor, and which are in any way connected with such us or participation by Minor.		
Parent or Guardian Signature	Date	Print Minor's Name
Parent or Guardian Signature	Date	Print Minor's Name