

# Kansas Rocks Recreation Park

## WAIVER AND RELEASE OF LIABILITY

In consideration of participation and activity while in the Kansas Rocks Recreation Park, do hereby release Kansas Rocks Recreation Park, and the KANROCKS Recreation Association, its members, officers, sponsors, land owners, successors and assigns from any and all responsibility or liability for any and all claims, arising from or related to the activities and participation on any property within or adjacent to the Kansas Rocks Recreation Park.

***The undersigned agrees to all of the following :***

1. Off-highway driving, biking, hiking is a hazardous activity with inherent dangers, which can result in severe damage, serious bodily injury and/or death.
2. With full knowledge of such risks, hazards and potential for damage, injury or death, the undersigned voluntarily and knowingly assume such risks and hazards and agree, The Kansas Rocks Recreation Park, and the KANROCKS Recreation Association, it's members, officers, sponsors, land owners, successors, and assigns shall not be liable, in any way, for any claims for damages, injuries or death resulting from participation in any activity on park or adjacent property.
3. The undersigned agree to abide by and follow all park rules as posted.
4. The undersigned acknowledge that the vehicle/bike is currently and will be maintained in good mechanical condition.
5. The undersigned's 4WD vehicle has adequate tow points in both front and rear.
6. The undersigned agree to wear an adequate protective helmet at all times while on bicycle.
7. The 4WD vehicle is insured for bodily injury liability insurance and personal injury protection insurance and/or medical payment coverage, as required by the State in which the vehicle is registered.
8. The driver/operator of the vehicle is licensed to operate a motor vehicle, whose driving privileges are not presently suspended or revoked, or under any restriction.
9. The undersigned have read this document carefully and have had the opportunity to discuss any of the terms of this Release and have had the opportunity to ask any questions of Park personnel.

***THIS WAIVER/RELEASE OF LIABILITY IS BINDING ON OUR HEIRS, INSURERS, PERSONAL REPRESENTATIVES OR ASSIGNS.***

Driver Fill Out	_____		_____		_____	
	Trail Vehicle (make, model, year)		License Plate#		Date	
	<i>Print Name</i>			<i>Signature</i>		
	Primary Driver/Rider Participant					
Address: _____						
City		State		Zip		
_____		_____		_____		
Passengers Fill Out	<i>Print Name</i>			<i>Signature</i>		
	Driver/Rider Participant					
	Driver/Rider Participant					
	Driver/Rider Participant					

Check here to receive information about park events. Please include E-mail address below: