

Date \_\_\_\_\_

**F & S ADVENTURES, LLC**  
**PARENT/GUARDIAN PERMISSION FORM - WAIVER AND RELEASE OF LIABILITY**

I am the Parent/Guardian for \_\_\_\_\_. I grant permission for him/her to participate in tubing activities on (date) \_\_\_\_\_ and agree as follows:

I fully understand and acknowledge that: (a) risks and dangers exist in my child's/ward's use of tubing equipment and participation in tubing activities; (b) my child's/ward's participation in such activities and/or use of such equipment may result in injury, illness, death or damage to personal property; (c) these risks and dangers may be caused by other participants, accidents, the forces of nature or other causes. Risks and dangers may arise from foreseeable or unforeseeable causes including, but not limited to, selection of trail or river route, water level, currents, weather conditions, risks of falling out of a tube and other risks, hazards, dangers that are integral to recreational activities that take place in a wilderness, outdoor or recreational environment, and (d) I hereby accept and assume these risks and dangers as parent/guardian personally and on behalf of named child/ward.

I have been advised that my child/ward must wear an approved personal floatation device at all times while on the water. I affirm that my child/ward will not be under the influence of alcohol or controlled substance and will not carry, use or consume these substances before or during his/her scheduled activities.

Any claims or dispute arising from my child's/ward's participation in F & S Adventures, LLC activities or use of F& S Adventures, LLC equipment shall be venued in the Town of Shandaken Justice Court or the New York State Supreme Court in Ulster County. I agree to indemnify and hold F & S Adventures, LLC harmless in connection therewith.

My child/ward is in good health. I understand that strenuous physical exertion may be required and my child has no known physical disabilities or health problems, which will present any risk or restrict ability to his/her participation in the activities. The above Agreement shall be binding on my heirs, successors, assigns, administrators and executors and of my child/ward.

I HAVE READ THE ABOVE AND BY SIGNING BELOW, I GRANT PERMISSION FOR MY CHILD/WARD TO PARTICIPATE IN F & S ADVENTURES, LLC TUBING ACTIVITIES, AGREE TO THE TERMS AND ASSUME AND ACCEPT ALL ASSOCIATED RISKS THEREWITH.

Group Name (If applicable) \_\_\_\_\_

Parent's or Guardian's Name (Print) \_\_\_\_\_

Parent's or Guardian's Signature \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_

Child's/Ward's Name (print) \_\_\_\_\_ Age \_\_\_\_\_ Trip Date \_\_\_\_\_

Child's/ Ward's Signature \_\_\_\_\_