



**Marin Treks Natural History Museum Children's Science Program
1559 South Novato Blvd. Ste H, Novato, CA 94947**

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

****IN ORDER TO PARTICIPATE IN THE LIVE ANIMAL PROGRAM ALL MINORS NEED TO HAVE THIS LIABILITY WAIVER SIGNED BY A PARENT OR A COURT APPOINTED LEGAL GUARDIAN PRIOR TO THE START OF THE PROGRAM. NO EXCEPTIONS!****

In order for us to process your registration(s) you must sign the Liability Waiver Consent after you have read and agreed to the terms. Registrations where the waiver/consent has been altered will not be processed. All participants/party attendees must sign this liability waiver prior to participating in this program.

Participant	
First Name:	Last Name:
Age: Grade:	School: Teacher:
Program Name/Date:	
Parent/Legal Guardian	
Adult Name:	Adult Name:
Home Phone:	Home Phone:
Cell Phone:	Cell Phone:
Email:	Email:

On behalf of myself, my personal representatives, heirs, next-of-kin, spouse, assigns, I hereby:

1. I understand that minor or serious accidents may occur during the Marin Treks program(s) that I am registering myself/child/ward for, that participants in this/these program(s) may sustain personal injuries, as a consequence of their participation in this/these program(s). The risks include but are not limited to cuts/scrapes/scratches, rashes, insect stings/bites, reptile bites, and diseases acquired from bites and stings. Knowing the risks of said event, nevertheless, I HEREBY AGREE TO ASSUME THOSE RISKS AND TO RELEASE AND HOLD HARMLESS TO THE FULLEST EXTENT ALLOWED BY LAW MARIN TREKS WHO THROUGH PASSIVE OR ACTIVE NEGLIGENCE OR CARELESSNESS MIGHT OTHERWISE BE LIABLE TO ME, OTHER PARENT, MY CHLD/WARD FOR DAMAGES.
2. I hereby release, discharge, and promise not to sue Marin Treks, doing business under its own name or any other name and/or any of its owners, officers, employees, volunteers, and agents for any loss, liability, damage, or cost whatsoever arising out of or related to any loss, damage, or injury (including death) to my/my child's/ward's person or property.
3. By signing this release, the undersigned understands and agrees that photographs may be taken during the programs and the undersigned hereby gives permission to have his/her photo taken and authorizes the use and reproduction of said photos by Marin Treks. All photos and negatives taken at any program become the sole property of Marin Treks Natural History Museum and may be used for promotional handouts and on our website. If the participant(s) is a minor under the age of 18, his/her parent or legal guardian authorizes the use of the photos as stated above.

BY MY SIGNATURE BELOW I ACKNOWLEDGE THAT I AM THE CHILD'S BIOLOGICAL PARENT/COURT APPOINTED LEGAL GUARDIAN. I AND THE CHILD'S OTHER PARENT(S) SIGNIFY THAT WE HAVE READ, UNDERSTAND, AND VOLUNTARILY AGREEE TO BE BOUND BY EACH OF THE TERMS STATED ABOVE AND PROMISE NOT TO SUE FOR ANY AND ALL CLAIMS. BY MY SIGNATURE I AM AGREEING TO THESE TERMS FOR MYSELF IF I CHOOSE TO PARTICIPATE IN THE PROGRAM.

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Parent/Legal Guardian Signature

Relationship to Participant

Date