

PARTICIPANT AGREEMENT, RELEASE AND ASSUMPTION OF RISK

Print Name _____ DOB _____ Phone Number _____

Address _____

Email _____

Signature of Participant _____ Date _____

**PARENT'S OR GUARDIAN'S ADDITIONAL INDEMNIFICATION
(Must be completed for participants under the age of 18)**

In consideration of the following minor(s): (print name(s) and DOB(s)) _____

_____ being permitted by ACA to enter the vehicle and go on the trip, I further agree to indemnify and hold harmless ACA from any and all claims which are brought by, or on behalf of minor(s), and which are in any way connected with such use or participation by minor(s).

Parent or Guardian Signature: _____

Print Name: _____

Date _____