

**INDIVIDUAL RELEASE OF LIABILITY/HOLD HARMLESS AGREEMENT
PRIVACY ACT STATEMENT**

This information is collected pursuant to 5 UCS 301. The purpose of this information is to form a legally binding release agreement. The information will be used to evaluate and defend potential claims against individuals concerned and the United States Government. Supplying this information is voluntary; however, failure to provide the information could result in a denial of permission to participate in the events stated below.

Acknowledgement of Risk

In consideration of the acceptance of my entry to participate in The USAG Humphreys House of Fear Haunted House, I do hereby forever release and discharge the Directorate, Family and MWR, BOSS program and the US Army (collectively, the “Organizers”) and each of their respective directors, members, trustees, agents representatives, officers, sponsors, licensors, employees and volunteers and agree to indemnify and hold them harmless from and against any and all causes of action of whatsoever kind or nature arising out of or related to any loss, damage or injury including death that may be sustained by me or any of my children and/or teammates who participate in any adventure activity or any of our property for whatever reason while participating in this high thrill seeking activity whether such loss, damage or injury is the result of negligence, breach of trust or breach of fiduciary duty on the part of the Organizers, or any other reason or cause.

I am aware, fully understand and acknowledge the risk and hazards inherent in participating in The USAG Humphreys House of Fear Haunted House, and I acknowledge that conditions may be hazardous and dangerous and that obstructions may exist, and that I hereby voluntarily assume all risks of loss, damage or injury including death, that may be sustained by me or any of my children and/or group or to any of our property while participating in this thrill seeking activity. These risks and dangers include, but are not limited to the hazards of falling, tripping, being fallen upon, being cold, hypothermia, hitting your head, while participating The USAG Humphreys House of Fear Haunted House. These dangers could result in, but are not limited to death, fractures, sprains, illness or injuries, injuries caused by the force of nature, injuries involving travel by automobile or other conveyances and/or loss of personal property. I also hereby acknowledge that these activities may take place in and around The USAG Humphreys House of Fear Haunted House, bldg. 6820 at USAG Humphreys.

I represent and warrant that I have sufficient medical coverage to cover my participation in this activity and I hereby consent to receive any medical treatment, at my own expense, that may be deemed to be advisable in the event of injury and/or illness participating in The USAG Humphreys House of Fear Haunted House.

I certify that I am physically capable and fit to participate in this activity. I acknowledge that I am in good health and good physical condition, and have no medical problems, that would affect my ability to participate in the activities associated with MWR programs and The USAG Humphreys House of Fear Haunted House.

I agree to read any written safety briefing provided to me by the Organizers as a condition of my The USAG Humphreys House of Fear Haunted House entry being accepted. I have entered this special event of my own free will. This waiver shall be binding on my heirs, executors, administrators, and legal representatives.

Liability Release

I hereby acknowledge that I have read and fully understand the Acknowledgement of Risk. I have and do hereby assume all of the above risks and will indemnify and hold DFMWR, BOSS, USAG Humphreys and The US Army, staff, volunteers or associates harmless from any and all liability, actions, causes of action, claims and demands of every kind and nature whatsoever which I now have or which may arise out of or in connection with my participation in The USAG Humphreys House of Fear Haunted House, or any activity arranged for me by The USAG Humphreys DFMWR and BOSS program. The terms hereof shall serve as a release and assumption of risk for my heirs, executors and administrators and for all members of my family.

I, _____ (please print name), have read and understand the risks associated with USAG Humphreys House of Fear Haunted House, and I agree to adhere to the safety precautions listed before me. I agree to the waiver as above and am committed to participating in The USAG Humphreys House of Fear Haunted House, on _____ (Date)

Participant/Parent or Legal Guardian’s Signature (if under age 18)

Age (if under age 18)