Wasatch Mountain Club (WMC)
Applicant Agreement, Acknowledgment of Risk, and Release from Liability

Activity: _____ **Organizer:** _____ **Date:** _____

VOLUNTARY PARTICIPATION: I acknowledge that my participation in all WMC activities is voluntary. No one is forcing me to participate. I agree to abide by the rules of the WMC.

ASSUMPTION OF RISK: I am aware that WMC activities involve risks, and may result in injury, illness, death, and damage to or loss of property. These dangers include but are not limited to: the hazards of traveling in remote areas without medical services or care, the forces of nature, the inherent dangers involved in participation in sports, wilderness travel, and social activities, and the negligent actions of other persons or agencies. I understand that all activities should be considered exploratory, with the possibility of unexpected conditions and route variations. The WMC is not, nor does it provide, a professional guide service. In order to partake in the enjoyment and excitement of WMC activities, I am willing to accept the risk and uncertainty involved as being an integral part of the activity. I acknowledge this risk, and assume full responsibility for any and all risks of injury, illness, death, or damage to or loss of my property.

PREPARATION: I understand that it is my responsibility to evaluate the difficulties of any WMC activity I participate in, and decide whether I am prepared by having the experience, skill, knowledge, equipment, and the physical and emotional stamina to participate safely.

RELEASE OF LIABILITY AND PROMISE NOT TO SUE: I agree that I, my heirs, personal or legal representatives hereby do release and hold harmless from all liability, and promise not to bring any suit or claim against the WMC, its activity organizers, directors, agents or representatives for any injury, illness, death or damage and loss of property resulting from my participation in any WMC activity even if they negligently caused the injury or damage.

LEGAL FEES: Should it become necessary for the WMC, or someone on their behalf, to incur attorney fees and costs to enforce this agreement, I agree to pay the WMC reasonable costs and fees thereby expended, or for which liability is incurred.

INSURANCE: I understand that the WMC strongly recommends that I maintain insurance sufficient to cover any injury, illness or property damage that I may incur while participating in WMC activities. In the event of injury, illness or death related to any WMC activity, I recognize that I, or my estate, will bear the full cost of my evacuation or recovery, and any related medical care that I may need. I acknowledge that the WMC carries no insurance whatsoever for any participants in WMC activities.

My signature below indicates I have read this entire document, understand it completely, understand it affects my legal rights, and agree to be bound by its terms. I certify I am at least 18 years old.

****ATTENTION** IF YOU ARE NOT A MEMBER OF THE WMC, PLEASE NOTIFY THE TRIP ORGANIZER!**

Member (Y/N)	*Signature*	*Print Name*	*Phone*	*Check Out*
_____	_____	_____	_____	_____
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Return this form to Wasatch Mountain Club, 1390 South 1110 East, Salt Lake City, UT 84105-2443
Please mark attention to the appropriate activity director, e.g., hike, bike, boat.

Revised10/12/2008