

## **L and J High Point Trophy Hunting Preserve Release of Liability Waiver**

In consideration of my participation in activities arranged for me by L and J High Point Trophy Hunting Preserve, I hereby release and covenant not to sue L and J High Point Trophy Hunting Preserve or its Owners, Employees, Representatives, Agents and Lessees from any and all present and future claims resulting from ordinary negligence and inherent risk of my participation , in my activities or arrangements, the use of the facilities and equipment of L and J High Point Trophy Hunting Preserve , including, but not limited to any loss, injury, damage or liability, by me, while on or about the premises of the Preserve.

I am fully aware and understand that L and J High Point Trophy Hunting Preserve, does not have, employ or contract with any medical services, provisions for ordinary or emergency medical services, including emergency cardiovascular assistance.

I agree that prior to participating in any activity arranged for me by L and J High Point Trophy Hunting Preserve, I will inspect equipment to be used and if any defects noted or I am not knowledgeable in the proper use of any of the equipment or services, I will obtain proper instructions for correct usage of such equipment or the facility.

I further agree to indemnify and hold harmless L and J High Point Trophy Hunting Preserve , Employees, Representatives, Agents and Lessees from any and all claims arising from my involvement or receiving instructions for activities incidental, whenever and however the claims may arise , including but not limited to travel to and from the activity site and / or participation at remote sites.

I assume all the forgoing risks and accept personal responsibility for any damage and losses of property, injury, permanent disability or death resulting therefrom.

**\* Indicates Required Field**

**\* Participants Name:**

**\* Address:**

**\* City:**

**\* State:**

**\* Zip:**

**Email Address:**

**\* Phone Number:**

**\* Please sign and Date below:**

**I have read and fully understand the above waiver, release and assumption of risk. By signing my name in the box below, I understand and voluntarily sign that I have waived substantial rights, release and assumption of risk.**

**Any persons under the age of 18 years of age must have a legal parent or guardian Co-Sign this form. If applicable, parent or guardian must sign name in box below.**