

## Sky Islands Summit Challenge

### Waiver and Release Form

#### Refund Policy-

**NO REFUNDS will be granted for cancellations within 7 days of a scheduled activity. If we cancel the activity for any reason, you WILL receive a 100% refund. Cancellations made prior to 7 days of the start of the challenge will receive a 75% refund.**

#### Media Release-

\_\_\_\_\_ (Initials) I hereby grant the City of Sierra Vista Leisure Services permission to record my and/or my family member's likeness and/or voice for use by television, film, radio, internet or print media to further promote the Sky Islands Summit Challenge.

Please understand that the City of Sierra Vista is not responsible for any publication other than our own.

#### Waiver and Release of Liability-

As a participant in the Sky Islands Summit Challenge, I recognize there are certain risks of physical injury and I agree to assume the full risk of any injuries, including death, damages or loss which I may sustain as a result of participating in this challenge.

I, for myself, my heirs, executors, administrators, and representatives do agree, absolve and hold harmless as a participant in the Sky Islands Summit Challenge the organizers, the US Government, the City of Sierra Vista, the Coronado National Forest, the Nature Conservancy, and affiliate agencies or sponsors of any responsibility for any accidents or injuries that I might suffer while participating in this event. I fully understand and acknowledge that: (a) risks and dangers exist by virtue of the nature of hiking (b) such activities, my use of equipment and/or participation in such activities may result in illness or injury or death or damage to personal property and (c) these risks and dangers may be caused by other participants, by accidents, by the forces of nature or other causes. Risks and dangers may arise from foreseeable or unforeseeable causes, including, but not limited to, selection of trail, current hazards, weather conditions and any dangers that are integral to physical activities that take place in a wilderness, outdoor or recreational environment. I hereby knowingly and voluntarily accept and assume these risks and dangers and the possibility of illness, injury or death or damage to personal property on my behalf.

I understand that the only support that is guaranteed as a participant in this event is a one-way shuttle from the Civic Center Parking Lot (corner of Coronado and Tacoma) to the trailhead in Ramsey Canyon at the start of the challenge, and a shuttle return at the end of the challenge in Miller Canyon. I understand that I complete the activity later than 5 p.m., I will be responsible for my own transportation.. Other than the shuttle, there is no certain support that I can expect, and I will bring all necessities that I may need (including water and food), on my own behalf. I will adhere to proper "pack it in, pack it out" trail philosophy during the Summit Challenge.

In addition to the absolute and unqualified release from all liability, **I hereby state that I am physically capable of participating in this event.** In the case of an accident or injury, I will do the best I can to get help. I categorically state that I am in good physical condition, and do not have any pre-existing health conditions that might put me at serious risk while participating in the Sky Islands Summit Challenge. **I understand that I must be in proper physical condition to participate in this event.** I understand that strenuous physical exertion will be required and I have no known physical disabilities or health problems that will present any risk to my participation in this event. Prior to the event it was recommended to me that I receive a physical examination to insure that I am in good health.

If I so choose, I can carry a cell phone and call emergency 911 and receive emergency aid and evacuation. However, I acknowledge that not all areas can receive cell phone reception and I hereby absolve and hold harmless the event organizers, the US Government, the City of Sierra Vista, The Coronado National Forest Service, The Nature Conservancy, and any affiliate agencies or sponsors if I am unable to receive a phone connection. All aid provided by any emergency service is my own responsibility.

I hereby consent to and permit emergency treatment in the event of injury or illness while participating in the event. I accept that if I end my hike prematurely, or if I don't make it to the trailhead in Miller Canyon before 5 p.m., I will make my own arrangements to get to my vehicle. I accept that I am responsible for carrying my own gear, food and water and will use discretion in trying to finish the hike.

I understand this waiver is good for one calendar year (January-December).

Signature:

\_\_\_\_\_ Date: \_\_\_\_\_