

MOSAIC Outdoor Mountain Club of Greater New York

150-20 73rd Avenue, Apt. 2B, Flushing, NY 11367

Acknowledgement of Risk and Release of Liability for:

Activity Description _____ Date _____ Type of Event (Hike/Bike/Canoe/ETC.) _____

Activity Leader's Name _____ Sheet 1 of ____ Side __ of ____

I am aware that activities of the MOSAIC Outdoor Mountain Club of Greater N.Y can be extremely hazardous. I am voluntarily participating in the above described activity with knowledge of the potential danger involved and hereby agree to accept any and all risks of injury, damage or death. I verify that I have the training, experience, clothing, equipment, and physical stamina to safely engage in the activity. I am in good health and have no physical, medical, or health condition, impediment or limitation that would interfere with my safe participation in this activity.

I agree to follow the instructions of the activity leader and obey all applicable federal, state, municipal, and park or facility regulations.

I am further aware that this is a release of liability between myself and the MOSAIC Outdoor Mountain Club of Greater N.Y and/or its chapters, groups, officers, trustees, directors, guides, leaders, instructors, contractors and volunteers, and I sign of my own free will and I am not under the influence of any drugs, alcohol or narcotics.

There is a Non-Member fee of \$5 to \$10 in addition to the cost of the event. Leaders are responsible to collect fees.

| | Member (Y/N) | \$ Paid | Signature | First Name | Last Name | Cell Phone | Home Phone | E-mail Address | License Plate / Make /Model /Color of Auto | (P)assenger, (D)rive, (B)us, (T)rain, (O)ther | |
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Activity Leaders: Please send completed forms and a check (NO CASH) at the conclusion of the activity, please mail all documents to:

Attn: Activities Forms, 150-20 73rd Avenue, Apt. 2B, Flushing, NY 11367.

NOTE TO EVERYONE: Please make sure to fill out all info on all forms for safety and insurance purposes.