BERGEN LAKE RESERVOIR WAIVER AND RELEASE FROM LIABILITY (MINORS)

Read and sign (required for participation):

I acknowledge that waterskiing, tubing and any related water activity or any sporting event is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury, or property loss. I HEREBY ASSUME THE RISKS OF PARTICIPATING IN WATER SPORTS AT BERGEN LAKE RESERVOIR AND AT 14130 W. BELLEVIEW AVE., MORRISON, CO. I hereby take the following action for myself, my executors, administrators, heirs, next of kin, successors and assigns: a) I WAIVE, RELEASE, AND DISCHARGE from any and all claims or liabilities for death or personal injury or damages of any kind, which arise out of or relate to my participation in. or my traveling to and from the Bergen Lake Reservoir event, THE FOLLOWING PERSONS OR ENTITIES: Dwight and Linda Sebald, Constance D. and J. Albert Sebald, C-Pal, Inc., VHW, LLC., Bergen Lake Ski Club, Amy and Michael McDonnell, Dan Abrescia, Debra Gradick, and the officers, directors, employees, representatives and agents for any of the above; b) I AGREE NOT TO SUE any of the persons or entities mentioned above for any of the claims or liabilities that I have waived, released or discharged herein; and c) I INDEMNIFY AND HOLD HARMLESS the persons or entities mentioned above from any claims made or liabilities assessed against them as a result of my actions.

BY SIGNING BELOW, I HEREBY AFFIRM THAT I AM EIGHTEEN (18) YEARS OF AGE OR OLDER, I HAVE READ THIS DOCUMENT, AND I UNDERSTAND ITS CONTENTS.

Guardian/Parent Name:	Signature:
Date:	
addition to the foregoing Waiver and Re The undersigned, (parent/guardian) the paren (insert minor's name) h	years of age, a parent or guardian must execute, in elease, the following, for and on behalf of the minor.) In and natural guardian or legal guardian of hereby executes the foregoing Waiver and Release for and on bind myself, the minor and all other assigns to the terms of the
Waiver and Release. I represent that I have I named herein, and I agree to indemnify and I claims or liabilities assessed against them as a	egal capacity and authority to act for and on behalf of the minor hold harmless the person or entities mentioned above for any result of any insufficiency of my legal capacity or authority to act on of the Waiver and Release. I hereby authorize any licensed
physician, emergency medical technician, hos named herein for the purpose of attempting or relating to the Bergen Lake Reservoir ever procedures deemed medically advisable in att administration of anesthesia as deemed advis	on of the waver and kerease. Thereby authorize any licensed spital or other medical or health care facility to treat the minor to treat or relieve any injuries received by said minor arising out of the interest of the authorize any such Medical Provider to perform all tempting to treat or relieve any such injuries. I consent to the able. I realize and appreciate that there is a possibility of of any medical treatment, and I assume any such risk for and on
I AM UNDER THE AGE OF EIGHT HAS READ AND COMPLETED SECTIO	TEEN (18) YEARS OF AGE. MY PARENT OR GUARDIAN II.
Minor's Printed Name:	Relationship to Minor:
Cwardian / Darrout Signatures	Data