TOWN - Austin Sign-in Waiver

Return: **TOWN-Austin**
P. O. Box 300494
Austin, TX. 78703-0009

I, one of the undersigned, recognize that outdoor activities may be dangerous with accidents resulting in personal injury and/or property damage. By signing this form, I am hereby releasing the Austin-TOWN, its officers, members, representatives, organizers, sponsors, and leaders from liability for injury to myself, or damage to my property as a result of participating in this event. I am responsible for inspecting facilities and equipment to be used and if anything is believed to be unsafe, I will advise the leader or refuse to participate. I assume all the foregoing risk and accept personal responsibility for any damages. **Specifically: at water related outings I will wear a life jacket or personal floation device. Specifically: at bike outings I will wear a helmet.**

Location_____ Date_____Leader_____

Print your name	Sign your name	Emergency contact name & phone number	Vehicle license number	Email and/or phone number