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## Haunted Fort Waiver & Release

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In consideration of my participation in any of the activities on site or related to Haunted Fort, and other good and valuable considerations. I, the undersigned, hereby release, indemnify and hold harmless the releasees identified hereinafter from any and all claims, actions, costs, expenses, judgments or damages of any and every kind and character, whether statutory or arising in contract or in tort, for any injury to my person, and/or for any damages of any and every kind and character, whether statutory or arising in contract or my property, directly or indirectly arising out of or in connection with or attributable to my participation in such activities, including but not limited to claims or damages for death, bodily injury, psychological trauma or property damage arising in whole or in part from the negligence of any of the Releasees and/or from negligence on my part.

As used herein, the term "Releasees" shall mean (a) Fort Abraham Lincoln State Park (b) State of North Dakota and North Dakota Parks and Recreation (c) any and all corporations, individuals, or entities sponsoring or supporting the aforementioned activities; (c) any and all corporations, individuals or entities participating in the construction, of and/or the operation of and/or any activities related to the said activities; and (d) any and all corporations, individuals or entities who are in any way associated with any of these activities

I release any likeness of my image created while participating in any of the aforementioned activities to remain the sole property of Haunted Fort and North Dakota Parks and Recreation

I will adhere to Haunted Fort's opportunity and harassment policies.

Haunted Fort and Fort Abraham Lincoln State Park and/or their representatives may authorize any and all medical treatment and/or transport in the event I become ill or injured while participating in any of the activities on site or related to Haunted Fort.

Thank you for completing this application form and for your interest in volunteering with us.

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### Agreement and Signature

I hereby certify that I have read and understand the foregoing language and its effects

Name (printed)	
Signature	
Date	

***If under 18 years of age, this form MUST be signed by a parent or guardian***

Name (printed)	
Signature	
Date	