

# ALACHUA AUDUBON FIELD TRIP RELEASE AND WAIVER

FIELD TRIP: \_\_\_\_\_ LEADER: \_\_\_\_\_ DATE: \_\_\_\_\_

## ALL PARTICIPANTS MUST READ AND SIGN

I HEREBY AGREE that I am going to participate in the above field trip offered by Alachua Audubon Society, and in consideration of being allowed to participate, agree that I alone will bear the risk of any personal injury or loss of personal belongings which occurs during or on account of my participation in the above field trip, both for myself and for any minor children accompanying me.

I intend by this release and waiver to release Alachua Audubon Society, Audubon of Florida, and National Audubon Society, as well as their officers and directors, both personally and in their representative capacities, from any claim for injury, damage, or loss, from any cause whatsoever, and I understand and acknowledge the significance and consequence of such specific intention to release all claims.

I hereby assume full responsibility for any injuries, damages, or losses that I or any minor children accompanying me may sustain. I agree that I am freely and voluntarily executing this release and waiver and that I have fully and completely read its contents.



**OPTIONAL: SMALL DONATION TO DEFRAY INSURANCE COSTS (CASH OR PAYPAL).**

PRINT NAME	SIGNATURE	EBIRD NAME/EMAIL	
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

## YOUR SIGNATURE MEANS YOU HAVE READ AND FULLY UNDERSTAND THIS DOCUMENT

Trip Leaders: Please send the amount collected to AAS via PayPal or a check payable to "Alachua Audubon," along with this release form, to AAS, PO Box 140464, Gainesville, FL 32614. Thank you!