SIGNATURE PAGE

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS WAIVER, RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT.

X_____
(Signature)

Date: _____/_____/_____

Print Name: _____

Your Phone: (_____) - _____ - _____

Street Address: _____

City: _____ State: _____ Zip: _____

Emergency Contact:

Name: _____ Phone: (_____) - _____ - _____

Your Email: _____

Children's names less than 18 years old that you are responsible for who are accompanying you today or may accompany you in the future:

1 _____ DOB_____

2 _____ DOB_____

3 _____ DOB _____

4 _____ DOB _____