

**EASTERN SIERRA 4WD CLUB  
PO BOX 983  
BISHOP, CA 93515**

**Release of Liability**

The undersigned, and in the event the undersigned is under 18 years of age, the undersigned's parent or guardian, for and in consideration of the granting of permission by the Eastern Sierra 4WD Club for the undersigned to participate in the following outing:

**ANY AND ALL OUTINGS AND ACTIVITIES**

Hereby hold(s) harmless and release(s) and forever discharge(s) the Eastern Sierra 4WD Club, its officers and members, either in their individual capacities or by reason of their relationship to said Club, and their successors, from any and all claims and demands whatsoever which the undersigned, and any of them, or third persons, and the representatives thereof, or any persons acting on their behalf have or may have against the said Club and/or its officers and members by reason of accident, illness, injury to or death of any person or persons, or damage to or loss or destruction of any property arising or resulting directly or indirectly from participation in the aforementioned outing/activity and occurring during said participation or any time subsequent thereto.

Participant (print full name): \_\_\_\_\_

Participant (print full name): \_\_\_\_\_

Guardian/Parent (if for a minor): \_\_\_\_\_

In case of emergency, please contact:

Name: \_\_\_\_\_, Phone: \_\_\_\_\_

Physician's Name: \_\_\_\_\_, Phone: \_\_\_\_\_

Please list special medical conditions or allergies: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_