



Ranch Activity / Event Participation Waiver

Date _____

Group _____

Name _____

REQUIRED WAIVER TO BE SIGNED:

By signing this waiver I agree to the following:

"I hereby acknowledge that the environment and the many Ranch activities contain real dangers and risks, and may result in injury to me. I hereby assume all risks of personal injury or death and all property damage from any cause or causes whatsoever arising while I participate in such activities. I am in good health and I am physically able to participate in said activities.

I agree to waive and release Aspen Ridge Ranch, Inc. and/or Nice Enterprises, Inc. and their companies and representatives, of any injury that I may sustain or any damage that I may cause in connection with any environment or activities.

I also authorize and consent to any emergency examination, medical diagnosis or treatment and hospital care to be rendered to me under general or special supervision and on the advice of any physician licensed to practice in the State of Colorado. I may be photographed and such photographs are the sole property of Aspen Ridge Ranch, Inc., and may be use to publicize future events or activities."

Signature _____

Emergency Contact Name _____

Emergency Contact Phone _____