



**JAY C. HORMEL
NATURE CENTER**
CITY OF AUSTIN

Voluntary Release, Acknowledgement and Acceptance of Risks by Participant 2024 Canoe/Kayak Use by Minors

Jay C. Hormel Nature Center: Austin Parks, Recreation, and Forestry Department
1304 21st Street NE, Austin, MN 55912
507-437-7519, info@hormelnaturecenter.org

In order to allow my child to use Jay C. Hormel Nature Center canoes or kayaks during the summer of 2024, I agree to hold the City of Austin, teachers, or staff harmless, and I waive any right to make claims or lawsuits against them. I acknowledge that this is not an essential service provided by the city of Austin.

I understand and acknowledge that the canoeing or kayaking that my child voluntarily engages in as a participant has certain risks. I understand that these risks, known or unknown, anticipated or unanticipated, may also result in injury, death, illness, disease, or damage to my child or my child's property or other third parties. I voluntarily agree and promise to accept and assume all responsibilities and injuries, death, illness, disease, or damage to my child or my child's property arising from my child's use of canoes or kayaks during the summer of 2024. I agree to pay any late fees my child may acquire. Late fees are \$20 per canoe/kayak.

This waiver does not apply to any injuries or damages that are the result of willful, wanton, or intentional misconduct by the City of Austin, teachers, or staff.

My child's use of a canoe or kayak is voluntary and no one is forcing my child to participate in spite of the risks. I understand the effect of this waiver and acceptance of risk on my legal rights.

My signature below indicates that I have read this entire document, understand it completely, acknowledge that it cannot be modified or changed in any way by oral representations, and agree to be bound by its terms. This agreement shall be binding on behalf of myself, my heirs, assigns, personal representatives, and estate.

Participant(s) Printed Name(s): _____

Parent/Guardian Printed Name: _____

Phone Number: _____

Address: _____

Parent/Guardian signature: _____

Date: _____