Ska.Co. JR. Timber Carnival Waiver Form

NAME	AGE	MALE/FEMALE	
ADDRESS	CITY	STATE	ZIP
PHONE		DOB	
WAIVER : I understand that the Skaparticipants. I certify that I am phy Carnival. In addition, I hereby releademands that I, me heirs, distributionary hereafter have for injury, dea Timber Carnival.	ysically and mentally abl ase and discharge Skam tes, guardians, legal rep	e to participate ir ania County, Its a resentatives or as	n the Junior Timber ctions, claims or ssigns now have or
Participant Signature:			
Reference to the Junior Timber Ca he/she executes this agreement, agree to the release by signing be	then the participant's p		
I, am the lands are permission to participate in release, and will, by the execution action against Skamania County, it harmless from all liability if the na against the County, its appointed a	n the Junior Timber Card of this agreement, also ts appointed and elected med minor, or his/her e	nival. I have read agree to not mak d officials, agents estate pursues any	and agree to this se any claims or take and employees or claims or actions
Parent Signature:			
	<u>EVENTS</u>		
	15-17 years old		
	Axe Throw		
	Keg Toss		
	Obstacle Pole		
	Choker Set		
	Boomstick/Log Ro	II (time permitted)	