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## Northeastern Regional Organization Field Meet Waiver of Liability

Name (print) \_\_\_\_\_ of

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

I acknowledge:

That this release shall be effective for all activities in which I participate that are part of the NRO field meet, regardless of whether actual entry into a cave is involved in my activities.

Activities may include caving and climbing, and I hereby represent that I understand and accept the fact that cave exploration and outdoor activities may involve risk or injury or death from various hazards, both obvious and obscure, including, but not limited to, injury by acts of other cavers, falling, being struck by falling objects, becoming lost, encountering water, cold temperatures, and other risks not specifically set out in this document.

I accept and assume all such risks, whether or not specifically set out herein, and I acknowledge that the National Speleological Society, Inc. and their internal organizations, and the Northeastern Cave Conservancy, Inc., and the members of these organizations, and those assisting with this regional event, and the individual members of any cave trip in which I may participate, and the owners and managers of property containing caves and the property on which the NRO field event is held, are not responsible for my well-being and I do not look to them, or any of them, to protect me from such risks.

In consideration of participating in this NRO field event, including being on the property that is the site of the NRO field event, I, on behalf of myself and on behalf of my heirs, assigns and representatives, do hereby irrevocably release all such individuals and organizations and landowners and their successors and assigns from any and all claims for injury or death or damage to persons or property that may occur as a result of my participation in activities related to this NRO field event.

This release does not give permission to visit any cave.

Signed \_\_\_\_\_ Date \_\_\_\_\_

I am also signing as the parent or guardian of these minors (under 18 yrs)

\_\_\_\_\_ (age) \_\_\_\_\_

\_\_\_\_\_ (age) \_\_\_\_\_

\_\_\_\_\_ (age) \_\_\_\_\_

\_\_\_\_\_ (age) \_\_\_\_\_