

KENTUCKY

KENTUCKY STATE PARKS



DEPARTMENT OF

PARKS

WAIVER AND RELEASE OF LIABILITY OF CLAIMS

PARK NAME: _____

EVENT: _____

DATE OF EVENT: _____, 20__

I, _____, the undersigned, plan to participate in _____ (name of activity) at _____ (name of state park) on _____, 20__ (date of activity).

In case of an accident or injury during this activity, I hereby covenant, promise and agree for myself, my personal representatives, heirs, and next of kin that neither the Tourism, Arts and Heritage Cabinet, Kentucky Department of Parks, nor _____ (name of state park), any of its agents, officers or employees shall be held responsible or liable for any negligence, implied or otherwise, for personal injury or damages suffered or sustained by me in connection with, arising out of, or resulting from any and all activities associated with the abovementioned event. I understand the inherent risk associated with the aforementioned event and participate at my own risk.

(Please Print) PARTICIPANT NAME

PARTICIPANT SIGNATURE **DATE**

WITNESS NAME (Please Print)

WITNESS SIGNATURE **DATE**

