## CRAKER'S ACRES LIABILITYWAIVER

Date Signed:				
Participant's Name:	Date of Birth: Zip: State: Zip:			
Address:	City:	State:	Zip:	
Telephone Number:				
Emergency Contact and Teleph	one Number:			
The placing of your signature in Personal Assumption of Risk; sir intentional act to unconditional Crakers Acres, Jon M Craker, Jer assistants, interests and obligaticlaims, rights, privileges, actions around, and about, the propertican be injured, or permanently including but not limited to, the unusual and unforeseen, negligas a bystander.	ngularly or collectively, he ly forever release, indemory W Craker and their fartions, heirs, assigns and ins, demands or conditions y, or any location that is disabled by my physical perforces of nature, circum	ereinafter referred inify, discharge, def milies, it's contractures from, includes resulting from my, used by Crakers Actoresence on Craker stances a reasonab	to as "Waiver", is an fend, and hold harmless, ual parties, members, officiling but not limited to, any voluntary actions in, on, res. The possibility exists the Acres environment due to be person would consider	hat I
As such, I unequivocally agree a conduct, contributory or benign intentional or unintentional, or and/or sportsmanship that plac wellbeing in jeopardy, will be er am not allowed to participate in signed this agreement/waiver.	n, any act; foreseen or un by the absent of, or the l ses my safety, present or mbraced within the inten	foreseen, absence apse of, established future health, phys t and specifics of th	of an act, whether d selective rules of safety ical and/or economic his Waiver. I understand th	
Participant's Signature:		Date:		