

WAIVER AND RELEASE FOR PARTICIPATION IN FE UNIVERSITY CLASS ACTIVITIES

In exchange for the opportunity to participate in the activity described below (the "Activity"), which is organized and sponsored by Fe University, Inc., ("Sponsor") a Wisconsin non-profit corporation engaged in the presentation of learning experiences for adults in the vicinity of Iron County, Wisconsin, I agree as follows:

Acknowledgement: I understand that the Activity involves, or may involve, travel to and from the site of the Activity and movement through an activity in the out-of-doors which, by its nature, may be unfamiliar, have uneven terrain and unforeseen hazards of landform and ice and snow, plants and animals. I am reasonably familiar with activities of this nature and agree to remain alert to my surroundings. I have had an opportunity to inquire about the location of the activity and the general level of fitness required. I believe that I have no physical limitation which would affect my participation in the Activity and I freely assume all risks of participation in the Activity.

Covid-19 precautions: I agree to abide by any Covid-19 requirements (mask wearing, vaccinations, etc) as requested by the instructor(s).

Release: For myself and for anyone claiming on my behalf, I release Sponsor and its successors, assigns, officers, employees and agents (collectively, the "Released Parties") from any and all claims, liabilities, obligations, disputes, demands, damages and causes of action known and unknown which I may have or claim to have against the Released Parties arising out of an injury, loss or damage to person or property that may be sustained as a result of my participation in the Activity. I also consent to the use of my photographic image in materials distributed by the Sponsor.

Construction: This Release shall be binding on me, my successors and assigns and shall inure to the benefit of the Released Parties, their successors and assigns. I have the legal capacity to execute this Release on the date below. This Release shall be governed by the laws of the State of Wisconsin.

Activity: Class and date(s): _____

Releasor(s)

Date: _____
[print name] _____

In the event of an emergency, please contact: _____

Date: _____
[print name] _____

In the event of an emergency, please contact: _____