

Myth Wood L.A.R.P.

Name of Participant _____ Date of Birth _____

Address _____ City _____ State _____ Zip _____

Telephone # _____ E-mail _____

Emergency contact: Name _____ Telephone # _____

If you have any serious health issues/problems and would like us to be aware of them, please list them.

ASSUMPTION OF RISK AND LIABILITY/PHOTO RELEASE

I, _____, have been advised that participating in a live-action role-playing game of the type run by Myth Wood necessarily involves risks, and that accidents, even serious or fatal accidents, can occur. While I understand that Myth Wood encourages safety, an accident may occur involving my property or me. In return for being allowed to participate in Myth Wood games, I fully assume the risks and agree to hold harmless Myth Wood, game participants, observers, officials, owners and /or administrators of land upon which the games/activity is being held from any claims, including those for injuries or damages to me or my property, or resulting from my death. I understand the substantial risks and am willing to assume them in order to participate. I understand this assumption and release and intend that this assumption and release will also be binding on anyone acting on my behalf and on my heirs. I understand that I do not have to sign this assumption and release, and that the only result of my not signing would be that I could not participate in Myth Woods games or other activities. I further understand that Myth Woods documents its games and activities via photography, video and audio recordings, artwork and other means. I hereby authorize Myth Woods to utilize such photographs, recordings, documents, artworks or other records of my participation in games or any other activity in any manner it chooses, and without further compensation to me.

Signature: _____ Date: _____

If under 18 years of age,

Parent or Guardians Signature: _____ Date: _____