



FISHING, BOATING & WATERSPORTS RELEASE

I UNDERSTAND THAT THE PURPOSE OF SINGING THIS DOCUMENT IS TO RELEASE RECREATION ASSOCIATES LLC, DMCM ASSOCIATES LLC, GUY HARVEY OUTPOST LTD., GUY HARVEY INC., WATERMARK MANAGEMENT LLC., AND EACH OF THEIR EMPLOYEES, OFFICERS, DIRECTORS, AGENTS, OTHER ASSOCIATED PERSONNEL, AND ITS BOATS (WHETHER OWNED, OPERATED, LEASED OR CHARTERED, INCLUDING RENTAL BOATS OR FISHING GUIDES OPERATING FROM OR AT CAMP MACK, A GUY HARVEY LODGE, MARINA AND RV RESORT, HEREINAFTER COLLECTIVELY REFERRED TO AS "CAMP MACK", AND TO HOLD THESE ENTITITES HARMLESS FROM ANY AND ALL LIABILITIES ARISING AS A CONSEQUENCE OF THE FOLLOWING, OR ANY OTHER ACTS OR OMMISSIONS ON THEIR PART, INCLUDING BUT NOT LIMITED TO NEGLIGENCE OF ANY TYPE:

1. I UNDERSTAND THAT I HAVE A DUTY TO EXERCISE REASONABLE CARE FOR MY OWN SAFETY AND I AGREE TO DO SO.
2. I UNDERSTAND THAT THERE ARE RISKS INVOLVED WITH BASS FISHING, BOATING AND WATERSPORT ACTIVITIES OF ANY KIND INCLUDING FISHING TOURNAMENT EVENTS (individually a "WATERSPORT ACTIVITY" and collectively, "WATERSPORT ACTIVITYIES"), including but not limited to equipment failure, perils of the sea, harm caused by marine creatures (including bites), acts of fellow participants, boarding or disembarking boats, and activities on the docks and I HEREBY ASSUME SUCH RISKS.
3. I assert that I am physically fit to use the equipment and participate in any of the foregoing WATERSPORT ACTIVITIES offered by the CAMP MACK.
4. I fully understand and agree that boats and waterborne vehicles used for WATERSPORT ACTIVITIES have limited medical facilities and in the event of illness or injury appropriate medical care must be summoned by radio and treatment will be delayed until I can be transported to a proper medical facility. In the event I show signs of distress or call for aid I would like assistance and will not hold CAMP MACK responsible for its actions in attempting the performance of rescue or first aid.
5. I grant to Camp Mack the right to use without payment or restrictions any photographs or video in which I appears with or without my name and for any lawful purpose, including such purposes as publicity, illustration, advertising, and Web content. I waive any right that I may have to inspect and/or approve the finished product and printed/electronic matter that may be used in connection therewith, or the use to which it may be applied.
6. **IT IS MY INTENTION BY THIS INSTRUMENT TO GIVE UP MY RIGHT TO SUE ALL PERSONS OR ENTITIES REFERRED TO HEREIN, WHETHER SPECIFICALLY NAMED OR NOT, AND IT IS ALSO MY INTENTION TO EXEMPT AND RELEASE CAMP MACK AND TO HOLD THESE ENTITIES HARMLESS FROM ANY AND ALL LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE, OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR GROSS NEGLIGENCE AND I ASSUME ALL RISK IN CONNECTION WITH THE WATERSPORT ACTIVITIES.**

I have read this agreement, am aware that it is a release of liability and a contract between CAMP MACK and myself my heirs and my personal representatives. I sign it of my own free will and agree to be bound by it, from the date of my signature, forever into the future.

Signature of Participant

Print Signature

Date (Day, Month, year)

Address: _____

City: _____

Zip: _____

Phone: _____ Home Work Cell

Email: _____

Age: _____

ADDENDUM FOR MINORS

IN CONSIDERATION OF THE MINOR CHILDREN LISTED BELOW being permitted by CAMP MACK to participate in activities and use equipment and facilities, I FURTHER AGREE TO INDEMNIFY AND HOLD HARMLESS the CAMP MACK FROM ANY AND ALL CLAIMS which are brought by, or on behalf of the Minor(s), myself, all heirs, assigns, and next of kin, and which are in any way connected with the participation of the child or children listed below in the CAMP MACK's activity, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELESEES, TO THE FULLEST EXTENT PERMITTED BY LAW.

By my signature below, I confirm that I am the parent or legal guardian of the listed child or children who will participate in the COMPANY's activity. I sign with complete understanding of its provisions. PLEASE PRINT THE NAMES OF ALL MINOR CHILDREN PARTICIPANTS BELOW:

1. _____
First / Last Name

Print Name

2. _____
First / Last Name

Print Name

3. _____
First / Last Name

Print Name

4. _____
First / Last Name

Print Name

5. _____
First / Last Name

Print Name

6. _____
First / Last Name

Print Name

Parent/Guardian Signature

Parent/Guardian Print

Date (day, month, year)