

Mushroom Workshop Registration Form with Release and Indemnification Agreement

This Release and Indemnification Agreement ("Agreement") is entered into by and between Steve Roberts and the undersigned workshop participant ("Participant"). The Participant understands that there is inherent and unavoidable risk in outdoor activities relating to hunting, collecting, and consuming wild mushrooms. These risks include but are not limited to the dangers of hiking in difficult terrain, the possibility of misidentifying wild mushrooms, and the possible allergic or toxic reaction that some individuals may have to otherwise edible mushrooms. The Participant hereby agrees to the following:

- 1. The Participant assumes all risks associated with the workshop. The Participant expressly acknowledges that it is the sole responsibility of the Participant to hike safely and to determine whether a wild mushroom may be consumed.**

- 2. The Participant releases, holds harmless, and indemnifies Steve Roberts from any and all liability relating to any illness, injuries to or death of any persons, or damage to property or both, incurred by the Participant as a result of participation in the workshop or related activity, including, but not limited to, the consumption of wild mushroom(s) or an injury while hiking, regardless of how, where, or when such injury, illness, death or damage occurs even if caused by the perceived negligence of Steve Roberts, or due to conditions, participation or defects of the premises or activities.**

This Agreement shall be governed by the laws of the State of Tennessee. If any portion of the Agreement is declared for any reason to be invalid or unenforceable, such invalidity shall not affect any other provision of the Agreement.

(signed) _____ (date) _____

If a couple is attending the workshop, the second person signs below

(signed) _____ (date) _____

Name of Workshop Participant(s) *(print clearly)* _____

Street Address _____

City, State, ZIP _____

Phone _____ email _____

Workshop Fee: \$60 per person (Early Registration: \$50 if postmarked by June 10, 2019)
make checks payable to Steve Roberts, address: 363 Dave Garrett Rd., Crossville, TN 38571

Total amount enclosed: _____

Thank you!

Steve Roberts