



EVENT RELEASE AND WAIVER

I hereby release Skye Canyon Community Association, Olympia Management Services, and their respective affiliates and related entities, their successors and assigns and their respective shareholders, partners, members, officers, directors, agents and employees (collectively, the "Releasees") from any and all liabilities, losses, claims, damages, demands, rights of action or causes of action, present or future, known or unknown, anticipated or unanticipated, arising out of or in any manner resulting from my attendance at the Skye Canyon event / activity described below. This release is a release of, without limitation, any liabilities, losses, claims, damages, demands, rights of action or causes of action resulting from or arising out of the acts or omissions of the Releasees.

This Release and Waiver shall be binding upon my heirs, executors, administrators and assigns. Further, I hereby agree to release and discharge the Releasees from any and all liability for any loss or theft of, or damage to, any of my personal property. I hereby release, discharge, covenant not to sue and agree to indemnify and save and hold harmless each of the Releasees from all liability, claims, demands, rights of action, causes of action, losses, or damages caused or alleged to be caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations and further agree that if, despite this agreement, I, or anyone on my behalf, makes a claim against any of the Releasees named above, I will indemnify, save and hold harmless each of the Releasees from any litigation expenses, attorney's fees, loss liability, damage or cost any may incur as the result of any such claim.

I agree to participate in the event / activity at my own risk. I understand that any and all comments or information provided by the Releasees shall not be construed as an official evaluation or recommendation, with respect to whether I am sufficiently physically fit for any exercise activities.

Based on information provided by a physician, I am of sufficient health to participate in this event / activity. I understand the nature of the activities that will be undertaken while on the property, and my experience and capabilities, and believe I am qualified, in good health, and in proper physical condition to participate in such activity.

This Release and Waiver and the relevant provisions of the governing documents for Skye Canyon Community Association are intended to and shall be construed so as to provide the broadest possible protection for the Releasees under law.

I acknowledge that I have carefully read this Release and Waiver and fully understand that it is a release and waiver of liability and sign it freely and voluntarily without any inducement.

Event/Activity:	Event/Activity Date:
Printed Name:	Resident Number:
Signature:	Date:
Property Address:	
Phone Number:	Birthday:
Emergency Contact:	Phone: