

WWII IN FORT VALLEY

Registration, Waiver(Release) and Indemnification

I, _____, in connection with my participation in the WWII in Fort Valley event held at Secret Passage Ranch in Fort Valley, Virginia, on June 17-19, 2016, state that I have voluntarily elected to participate in the living history event depicting soldiers during World War II.

In connection with the event WWII in Fort Valley to be held at Secret Passage Ranch, I hereby agree to release, indemnify and hold harmless Secret Passage Ranch, its officers, employees and agents, from any and all kind of liability and all claims for damage to person(s) or property as a result of my participation in this event. By signing this Release and Indemnification, I understand and agree to assume all risks associated with my participation in this event and I further agree to be legally bound by the terms of this Release and Indemnification.

The specific facilities, instructions, equipment and/or activities are as follows: The use of the roads and pastures of Secret Passage Ranch in Fort Valley, Virginia on which we participate. I am aware that blank ammunition (including a simulated bazookas, artillery pieces, and smoke grenades) may be fired during the event.

I fully understand that there are certain risks and dangers associated with the facilities, instructions, equipment and/or activities that can not be eliminated regardless of the care taken to avoid injuries and that these risks and dangers have been fully explained to me. I fully understand the risks and dangers involved. I fully assume the risks and dangers involved as acceptable to me, and I agree to use my best judgment in undertaking these activities, and I agree to follow all safety instructions.

I am a competent adult, aged _____, and I assume these risks of my own free will. I have read this Waiver and Assumption of Risk and I understand its terms. I understand that I am giving up substantial rights and I acknowledge that I intend by my signature that this be a complete and unconditional release of all liability to the greatest extent allowed by the law.

Impression: Allied Axis

Unit: _____

Horse Yes No

Vehicle Yes No

Vehicle type: _____

Number of tents: _____

Special gear/equipment: _____

Date: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ e.mail: _____

Emergency contact name: _____

Phone: _____

Registration fee is \$10 per participant. Checks can be made out to "Secret Passage Ranch."

Mail completed form with check or money order to:

Don Warlick
WWII in Fort Valley
321 Spring Mountain Way
Fort Valley, VA 22652

Call 540.933.6564 or e-mail questions to ww2@secretpassageranch.net