



**2010 MORROW ROAD HAUNTED TRAIL  
WAIVER/RELEASE FORM**

In consideration of the permission and the privileges by me by the Morrow Road Haunted Trail to utilize the property and services and all related events and recreational activities including the trail, parking lots, and food & tent area. I, undersigned, HEREBY RELEASE, WAIVE AND FOREVER DISCHARGE THE MORROW ROAD HAUNTED TRAIL, ITS VOLUNTEERS, MORROW ROAD PRODUCTIONS, LLC AND THE PROPERTY OWNER (GINO & DENISE PETROVICH) from any and all liability to the undersigned, of all claims, demands, actions, causes of action, damages, losses, liabilities, costs, expenses and compensation on account of death or injury to my person and/or property and any known and unknown, foreseen and unforeseen damages and consequences thereof caused by or arising out of my use of facilities, property or participation in any activity or event.

I certify and warrant that I am in good physical condition and able to participate in the Morrow Road Haunted Trail and do agree to do so at my own risk. With respect to my children or other persons whom I have care or custody, I certify and warrant that to my best of my knowledge such children are in good physical condition and able to participate in any activity by the Morrow Road Haunted Trail.

**I HAVE CAREFULLY READ THE FOREGOING WAIVER/RELEASE FORM AND KNOW THE CONTENTS THEREOF AND HAVE SIGNED THIS WAIVER/RELEASE FORM AS MY OWN FREE ACT.**

This WAIVER/RELEASE from liability shall be constructed as a contract between the undersigned and the Morrow Road Haunted Trail and the terms of this WAIVER/RELEASE from liability includes the permission granted to utilize facilities/properties and participate in programs and that this WAIVER/RELEASE from liability is intended to be as broad as permitted by the Laws of the State of Michigan.

**Please print clearly:**

**Participant:**

---

**Printed Name of Participant**

---

**Street Address** **City** **State** **Zip**

---

**Home Phone #** **Cell Phone / Alternate #**

/ / 2010

---

**Signature of Participant** **Date**

**Parent / Legal Guardian:**

---

**Printed Name of Parent / Legal Guardian**

/ / 2010

---

**Signature of Parent / Legal Guardian** **Date**