GENERAL RELEASE OF LIABILITY, WAIVER OF CLAIMS, EXPRESS ASSUMPTION OF RISKS, AND HOLD HARMLESS AGREEMENT

| 1. In consideration of crossing, renting, participating in pro | |
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| the private property of JOHN AND KATHRYN MCNITT , loc parcels 20, 21, and 22, also known as CAMP WATANDA or V | |
| | elf and my estate, heirs, administrators, |
| executors, and assigns, hereby release, forever discharge and how Lake Vera Mutual Water Company (LVMWCo), their heirs, emvolunteers (collectively called, the "RELEASEES") from any arrhowever caused, for any all damages, claims, demands, or cause administrators, executors, or assigns may have for any loss, illned damage arising out of, connected with, or in any manner pertain WATANDA, including programs provided by 3 rd parties, wheth RELEASEES, accident, omissions or otherwise. | Id harmless John and Kathryn McNitt, the aployees, representatives, agents, and all liability and responsibility whatsoever, es of action that I, my estate, heirs, ess, personal injury, death, or property ing to my presence on the property of CAMP |
| 3. I fully understand that there are potential risks and hazar natural area, that include bodies of water, falling/fallen timber, r include rattlesnakes, bears or wildcats. Insects such as Brown R Yellow Jackets/Bees; and Mosquitoes known to spread WEST N LYMES DISEASE have been found in Nevada County. My pre CAMP WATANDA and voluntarily assume all risks and respon and personal injury, including death weather caused by negligen or otherwise. 4. Camp Watanda does not provide lifeguards. Swimming | ruts and holes; and local wildlife that may decluse Spiders, Black Widow Spiders, NILE VIRUS and Ticks known to spread esence is voluntary to be on the property of asibility for loss, property damage, illness, ace of the RELEASEES, accident, omissions |
| responsible for supervising their children. Organized camps, chiparents are not present, must provide a certified lifeguard. | <u> </u> |
| 5. I further hereby agree to indemnify and hold harmless the damage, judgment, settlement, or costs, including court costs an incur due to my presence or participation on the property of CAI provided by 3 rd parties, weather caused by negligence of the RE | d attorney fees, or medical fees that they may MP WATANDA, including programs |
| 6. I further understand that John and Kathryn McNitt or the policy covering any circumstance arising from my presence on t such, I am aware that I should review my personal insurance por | the property of CAMP WATANDA. As |
| 7. In signing this agreement, I acknowledge and represent t it voluntarily; no oral representations, statements, or inducement (18) years of age and fully competent. I understand that I am and voluntarily agree to be bound by it. | ts have been made. I am at least eighteen |
| SIGNATURE | DATE |
| PRINT | |
| PHONE (ADDRESS | |
| <i>CITY STATE</i> | ZIP |
| *(If participant is under the age of 18, please list the minor(s) | |
| *NAME | |
| *NAME*NAME | |
| *NAME | |
| Signature of parent or legal guardian: | |

A release of liability is required for each adult 18 and over, Children under 18 years in the same family may be grouped on one form.