



ACKNOWLEDGMENT OF RISK AND WAIVER OF LIABILITY

- I understand that there is no alcohol, smoking, or illegal substances allowed anywhere on the property. THIS IS A NO-SMOKING HOME.**
- I agree to indemnify Gilgal Retreat against any liability or loss and against all claims or actions based on or arising out of damage or injury to persons or property caused by me**
- I understand that under no circumstances is anyone allowed to be in the water,**

GILGAL RETREAT

GILGAL RETREAT 49289 HARRY JAMES RD. RIDGE, MD 20680

Please See Following Signature Page



I HAVE CAREFULLY READ AND CLEARLY UNDERSTAND THAT BY SIGNING THIS ACKNOWLEDGMENT OF RISK AND WAIVER OF LIABILITY FORM WITH FULL UNDERSTANDING OF ITS TERMS AND CONDITIONS.

I am signing this form for myself and on behalf of the following people, all of whom are guests with my group.

NAMES:

PRINTED NAME OF PERSON SIGNING THIS FORM:

○ SIGNATURE:

DATE:

ADDRESS:

EMAIL:

PHONE:



GILGAL RETREAT