

WAIVER for Special Use Permit CHIL2513

I, intending to be legally bound, hereby, for myself, my heirs, executors and administrators, do recognize that there are risks of accident or injury associated with this activity and voluntarily assume all risks of accident or injury and release and forever discharge the Ohio Department of Natural Resources, its employees, officers and agents, from any and all liability for personal injury or property damage of any kind sustained on the Scioto Trail State Forest property during the activities state in the Special Use Permit held on October 4, 2026 whether such personal injury or property damage is caused by the negligence of the Ohio Department of Natural Resources, or its employees, officers, or agents, or otherwise. I further covenant and agree to indemnify and hold harmless the Ohio Department of Natural Resources, its employees, officers, and agents, from all loss and expense, including but not limited to, damages, legal expenses and cost of defense, in any matter arising from my use of the state forest.

Participant (Signature)

Date

Participant (Name Printed)

Date

Parent or legal guardian (signature) if participant is
under 18 years of age.

Parent or legal guardian (Name Printed)

