

RELEASE OF LIABILITY AND ASSUMPTION OF ALL RISKS

Sister Communities of San Ramón, Nicaragua, Inc.

A 501 (c) (3) non-profit organization

In consideration of and as part payment for the right to participate in travels and other activities organized by Sister Communities of San Ramón, Nicaragua and Finca Esperanza Verde, I hereby freely make the following representations and enter into this agreement:

This agreement shall apply to Sister Communities of San Ramón, Nicaragua, Finca Esperanza Verde, their directors, officers, employees, agents, affiliates and subsidiaries, and specifically Lonna and Richard Harkrader in all capacities including individually, and all such parties' successors and assigns. All of these entities and persons are hereafter collectively referred to as "SCSRN".

I fully realize the hazards of participating in travel and activities of this type and voluntarily assume all the risks associated with such participation.

I understand the risks include but are not limited to: the hazards of traveling in remote and/or mountainous terrain, accident or illness in remote places without readily available medical facilities or treatment, the forces of nature, the hazards of war, civil insurrection, terrorism and street crime. I know that the injuries and damages can occur by natural causes or activities of other persons, animals, trip members, trip leaders and assistants or third parties, and such injuries and damages can occur as a result of negligence or because of other reasons. I understand that airports, roads, railroads, highways, bridges, buildings and other man-made structures, as well as motor vehicles, aircraft and other conveyances may not be constructed or maintained up to standards customary in the United States.

I agree that it is my sole responsibility to be familiar with and capable of handling the physical and/or mental demands associated with the travel and other activities.

I understand that events such as airline or hotel cancellations, delays and other adverse travel or accommodation conditions or events may occur, and I will not hold SCSRN financially liable in any way for those events.

I also hereby waive, release, discharge and agree to hold harmless SCSRN from all claims of any kind whatsoever, at law or at equity, including but not limited to negligence and claims regarding any injuries or damages to persons or property, including death, relating in any way to my participation in travel or activities in which SCSRN participates in any manner.

I understand and agree that this agreement is binding upon my heirs, executors, administrators and assigns, and includes any minors accompanying me in the travel or any other activities.

I understand that I have the option to purchase travel and other insurance.

In the event that I have any dispute with SCSRN, I agree that we will resolve by binding arbitration any and all claims, disputes or controversies of any kind whatsoever arising out of or relating in any way to my participation in travel or any other activities in which SCSRN participates in any manner. If a party desires to demand arbitration, the party shall give notice to the other in writing. The parties will attempt to agree upon the designation of an arbitrator. If the parties do not reach agreement regarding designation of an arbitrator within twenty days of the written notice, the arbitrator shall be selected pursuant to the commercial rules then in effect of the American Arbitration Association. Procedures concerning the arbitration shall be by agreement of the parties, but in the event the parties are unable to agree, the procedures shall be pursuant to the commercial rules then in effect of the American Arbitration Association.

The parties agree that the provisions of this agreement shall not be construed in favor or against any party on the basis that the party drafted the agreement. In the event that any clause or provision of this agreement shall be held invalid, the remaining provisions shall remain in full force and effect.

I confirm that I have read this document in its entirety and I appreciate, understand, and freely and voluntarily assume all risks of such injuries and damages and notwithstanding such risks, I agree to participate in the travel and all other activities.

Name (please print): _____

Signed: _____ Date: _____

If a minor is participating in the travel or other activities, the minor's parent or legal guardian must sign this agreement on behalf of the minor.

I hereby agree and consent to the foregoing acknowledgment of responsibility, assumption of risk, and release of liability on behalf of the minor below.

Name and Age of Minor: _____ (Age)

Name of Parent or Guardian: (please print) _____

Signed: _____ Date: _____