

**mParks Grand Experience  
2023 Participant Consent Form**



**Trip Participants: Please sign this form and return to your trip coordinator.**

The undersigned assumes all responsibility for himself / herself while involved with the Michigan Recreation & Park Association (herein noted as mParks) Grand Experience program with respect to any actions taken in pursuance of any or all such involved activities. Moreover, it is agreed that mParks, its employees, volunteers and respective agents shall not be liable or responsible for any property damage and/or personal injury and/or other loss or damage suffered by the participant. In the event of any injury, permission is hereby given to mParks, its employees, volunteers or respective agents to seek available medical assistance. While at the mParks Grand Experience program, I agree that mParks agents or associated trip leaders may be informed of medical conditions if I seek medical treatment while engaged in this program.

The participant represents that he/she is in good physical and mental condition and able to participate in the program, and that he/she shall be responsible for his/her own health. The participant accepts full risk and knowledge that some activities require the assistance of unscreened volunteer supervisors.

I further acknowledge that mParks cannot guarantee that I will not become infected with the Coronavirus/Covid-19. I understand that the risk of becoming exposed to and/or infected by the Coronavirus/COVID-19 may result from the actions, omissions, or negligence of myself and others. I acknowledge that I must comply with all set procedures to reduce the spread while participating in the program.

I hereby release and agree to hold mParks harmless from, and waive on behalf of myself, my heirs, and any personal representatives any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that may be caused by any act, or failure to act of the association. I understand that this release discharges mParks from any liability or claim that I, my heirs, or any personal representatives may have against the association with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, any participation with the mParks Grand Experience.

The participant agrees that photos may be taken of trip participants and used in marketing opportunities by mParks.

Participant's Name – Please Print \_\_\_\_\_

Participant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Group Name \_Midland Parks & Recreation\_\_\_\_\_