THE NEW YORK STATE OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION

NEW MEMBER ACKNOWLEDGMENT OF RISK AND RELEASE

I,	affirm that I am a competent swimmer,	am
unguarded areas, because of its death to myself, other participar lifeguards will not be available to Recreation and Historic Preserve me to engage in this activity on S	e age of eighteen. I understand that swimming, especially in nature, carries with it a possibility of personal injury and possibilits, and third parties. I understand that in case of emergency assist in a timely fashion. I acknowledge that the Office of Paration and the Palisades Interstate Park Commission agree to per State lands only upon my assumption of responsibility for any injustified parties which may result from engaging in this activity.	ks, mit
to mysell, other participants, or	third parties which may result from engaging in this activity.	
Minnewaska to engage in ungual activity and forever discharge, reaction of Parks, Recreation and the Minnewaska Distance Swimmany and all liability for damage of participation in lap swimming in keep harmless the People of the Preservation, the Palisades Interagents and employees from all of description which might result from binding upon my executors, admin addition, I acknowledge that	the State permitting me to utilize the "family beach" at Lake rded lap swimming, I hereby assume all risks involved in said clease and absolve the State of New York, the New York State Historic Preservation, the Palisades Interstate Park Commission mers Accociation (MDSA), and its officers, agents, employees for personal injury, including death, which may result from my an unguarded area. I furthermore agree to defend, indemnify a State of New York, the Office of Parks, Recreation and Histor state Park Commission, the MDSA, its commissioners, officers claims, suits, actions, damages and costs of every nature and om the conduct of activities under this permit. This release shall inistrators, next of kin and assigns.	end ic , I be
covered under the permit.	t a fee to engage in any recreational activity, including the activity	lies
Name (print)		
Signature	Date	
Address:		
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Certification by Organization indicating that such individual has complied with testing requirements.