VENTURE OUT SOCIAL CLUB, INC.
RELEASE AND INDEMNIFICATION FORM

PARTICIPANTS: (Name and Address)
Please print clearly.

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ACTIVITY:
Please print clearly.

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DATE:_____

I, as the Participant named above, am eighteen years of age or older and have volunteered myself to participate in the activity listed above (the "Activity"). I realize the Activity may expose me to hazards or risks that may include but are not limited to: broken or sprained limbs; overexertion; heat exhaustion; various native and domestic animals; native and non-native plants, fungi, and molds; disease and illness, including, but not limited to, COVID-19; along with other, more serious injuries, including hospitalization and death. I understand and appreciate the nature of such hazards and risks and voluntarily assume them. I have read and agree that I will comply with the Association's COVID-19 mitigation policies, as well as its written rules and regulations for participation in the Activity, and I accept responsibility to always act in a safe manner. If the Indemnified Parties have not enacted specific rules on an issue, I understand that the Indemnified Parties recommend that I abide by current CDC guidelines to help prevent the spread of COVID-19.

In consideration of my participation in the Activity, I hereby accept all risk to my health and property and I hereby release Venture Out Social Club, Inc., Venture Out at Mesa, Inc., their governing boards, officers, agents, employees and representatives (collectively, the "Indemnified Parties"), from any and all liability to me, my personal representatives, estate, heirs, next of kin, and assigns for any and all claims and causes of action for loss of or damage to my property and for any and all illness or injury to my person, including death, that may result from or occur during my participation in the Activity, whether caused, in whole or in part, by negligence of the Indemnified Parties or otherwise. I further agree that, if any litigation or claim results arising out of, pertaining to, or in relation to my participation in the Activity, and the Indemnified Parties are named as a party or joined as a party to such litigation or claim, I agree to defend, indemnify, and hold harmless the Indemnified Parties in regard to any judgment entered against them and in regard to their litigation expenses, including but not limited to reasonable attorneys' fees, costs and out-of-pocket expenses, from liability for the injury or death of any person(s) and damage to property caused, in whole or in part, by my act or omission while participating in the described Activity, regardless of whether it is caused in part by a party indemnified thereunto. The Indemnified Parties shall control the defense provided by Participant pursuant to this provision and shall choose the counsel to be used in such defense. Such obligations shall not be construed to negate, abridge, or otherwise reduce any other right or obligations of indemnity that would otherwise exist as to any party or person described in this paragraph.

I HAVE CAREFULLY READ THIS AGREEMENT AND UNDERSTAND IT TO BE A RELEASE OF ALL CLAIMS AND CAUSES OF ACTION FOR MY INJURY OR DEATH OR DAMAGE TO MY PROPERTY THAT OCCURS WHILE PARTICIPATING IN THE DESCRIBED ACTIVITY AND IT OBLIGATES ME TO INDEMNIFY THE PARTIES NAMED FOR ANY LIABILITY FOR INJURY OR DEATH OF ANY PERSON AND DAMAGE TO PROPERTY CAUSED, IN WHOLE OR IN PART, BY MY ACT OR OMISSION.

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Signature Date Witness Date