



In consideration of my membership (including my family and all guests) to participate in the activities and swim at Crystal Lake, I for myself, my heirs, executors and administrators, hereby release and forever discharge Ramapo Mountain Lakes and all representatives and personnel from all liabilities, actions, claims, demands, damages, costs and expenses, which may now or in the future have against them or any of them arising out of my participation at the above mentioned Crystal Lake including, but not limited to, all injuries that may be suffered by me.

I attest and verify that, to the best of my knowledge, my physical condition and fitness are adequate for me to safely take part in the activities offered at Crystal Lake. In the event of an emergency, I hereby authorize the Ramapo Mountain Lakes staff to seek medical help.

I have read the above message and agree to the terms and conditions of membership.

Signature \_\_\_\_\_ Date \_\_\_\_\_

In case of emergency, please contact my physician: \_\_\_\_\_ Phone No: \_\_\_\_\_