



Spearhead Trails
Southwest Regional Recreation Authority
PO Box 1180 • 798 Park Avenue NW • Suite 208
Norton, Virginia 24273
www.SpearheadTrails.com

SRRA USER PERMIT APPLICATION AND LIABILITY WAIVER

DATE _____ PERMIT # _____
FIRST NAME _____ LAST NAME _____
ADDRESS _____
CITY _____ STATE _____ ZIP CODE _____
D/L# _____ PHONE NUMBER _____
EMAIL _____ PRIMARY OHV _____
HOW DID YOU HEAR ABOUT US? _____

ATTENTION: READ THE FOLLOWING STATEMENTS CAREFULLY

Your use of the Spearhead Trails and facilities (hereafter, the "Area") is conditioned upon compliance with all user rules and Virginia Law. Your acceptance of the permit constitutes your agreement to comply with all applicable rules and laws. Violation of any rule or law renders the permit null, void, and immediately revoked by the Southwest Regional Recreation Authority (hereinafter the "Authority").

ACKNOWLEDGMENT AND ACCEPTANCE OF RISK:

I understand the use of the Area involves the danger of encountering both known and unknown hazards and risks which could result in physical or mental injury, illness or disease, damage to property, injury to third parties, and death. Knowing this, I assume all risks and dangers, and I assume all responsibility for any losses and/or damages, whether caused in whole or part by any conduct of the Authority and/or Spearhead Trailblazers, Inc., (Spearhead) their agents, officers, employees, Licensors and Lessors.

INDEMNIFICATION AGREEMENT:

For and in the consideration of being permitted by the Authority to use its and/or Spearhead facilities, and to participate in its recreational events and activities, I agree to this WAIVER, RELEASE AND INDEMNIFICATION. I stipulate and agree to SAVE AND HOLD HARMLESS, INDEMNIFY, AND FOREVER DEFEND the AUTHORITY, SPEARHEAD TRAILS, THEIR LICENSORS AND LESSORS from and against any and all claims, actions, demands, expenses, liabilities (including reasonable attorney's fees) including NEGLIGENCE claims made or brought by the undersigned or by anyone on behalf of the undersigned, as a result of the undersigned's participation in AUTHORITY'S recreational events and activities and my use of the Area.

WAIVER AND RELEASE OF LIABILITY:

By signing this form, I acknowledge that I am aware of the dangers and, that I do, on behalf of myself, my personal representatives and my heirs, voluntarily agree to RELEASE, WAIVE, DISCHARGE, HOLD HARMLESS, DEFEND AND INDEMNIFY the Authority, Spearhead, and their Licensors, Lessors, agents, officers and employees from any and all claims, actions, or losses or damages for bodily injury, property, wrongful death, loss of services or otherwise which may arise out of my use of the Area or my participation in any activities in the Area. I specifically understand that I am releasing, discharging and waiving any claims or actions that I may have presently or in the future for any conduct by the Licensors, Lessors, agents or employees of the Authority and/or Spearhead. This document shall be binding on my potential heirs, executors, administrators, and assigns.

Date: _____
Signature _____
Name (Print) _____
Age (If Under 18) _____

By signing this form as the Parent or Guardian of a participant under the age of 18, (minor) in addition to binding myself and the participant to the above terms, I am also certifying the following:

- 1) Any machine operated by the minor will be of a model that is recommended by the manufacturer as appropriate to the minor's age and size;
- 2) All rules governing the use of the Area have been reviewed by me and explained to the minor in sufficient detail so that the minor can abide by the same; and
- 3) Any minor for whom I am signing who is under the age of 18 shall remain under my immediate supervision and within my sight at all times.

Signature of Parent or Guardian Required if Participant is Under Age 18:

Parent or Guardian

Check if using equine trails

TRAIL RIDER POLICIES ON BACK