

Coldharbour Mill Trust Ltd
Registered Charity No: 1123386
Coldharbour Mill, Uffculme, Cullompton, Devon. EX15 3EE

Accident Waiver and Release of Liability Form
Paranormal Investigation Events at Coldharbour Mill

I hereby assume all the risks of participating/attending this event, namely paranormal investigation at Coldharbour Mill. By way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons attending.

I certify that I am physically and/or have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in this activity or event. I acknowledge that this Accident Waiver and release of liability form will be used by event and venue management, and that it will govern my actions and responsibilities at said activity or event.

A. I WAIVE, RELEASE AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from this event.

B. I INDEMNIFY, HOLD HARMLESS, AND WILL NOT SUE the entity and/or persons organising or providing venue for this event and waive them from any and all liabilities or claims made as a result of participation in this activity or event, whether caused by negligence of release or otherwise. I acknowledge that this activity or event may test a person's physical and mental limits and may carry with it potential for death, serious injury or property loss. The risks may include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of participants, equipment, vehicular traffic, actions of other people including, but not limited to, participants, event organisers, volunteers, and/or producers or the event.

I hereby consent to first aid treatment which may be deemed advisable in the event of injury, accident, and/or illness during this activity or event. I understand that at this event or related activities, I may be photographed. I agree to allow photo, video and film likeness to be used for any legitimate purpose by the event holders, producers, organisers and venue management. The accident waiver and release of liability shall be construed broadly to provide a release and waiver to the maximum intent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT, AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

NAME:.....

SIGNATURE:

DATE:

Name of Event Organiser: GHOSTLY NIGHTS LTD