DELTA BROTHERHOOD INTERNATIONAL ASSUMPTION OF RISK AGREEMENT WITH RELEASE OF LIABILITY AND WAIVER

This is a legal document. Read the entire Agreement before completing. You must place your initials in every location where indicated.

ALL INFORMATION REQUESTED IS REQUIRED TO BE COMPLETED

and the days preceding and subsequent to the event for setup and breakdown, if applicable-which includes bu seminars, workshops, and activities involving sadomasochism (S/M), as well as sports, social, and related activit the facilities and equipment (hereinafter collectively referred to as "DELTA 16"), held by or through DELTA BRO	ies, and the use of
INTERNATIONAL, an Illinois not-for-profit corporation,	() Initial
	, ,
I,born on (Name of participant) mo	nth / day / year
residing at, hereby agree as fo	llows:
1. ASSUMPTION OF RISK I understand and acknowledge that sadomasochism and other activities at DELTA dangers that no amount of care, caution, preparation, or expertise can eliminate, and I expressly and voluntarinarm of any kind, including but not limited to emotional harm, personal injury, infection, disease, or death sus participating in DELTA 16, whether or not caused by the negligence of the released parties listed below in parathat such consequences may result not only from my own actions, inactions, or negligence, but may be caused inactions, or negligence of others, the procedures and techniques of play, the conditions of the premises, or be there are other risks that may or may not be foreseeable.	ily assume all risk of tained as a result of graph 2. I understand I by the actions,
2. EXEMPTION FROM LIABILITY. I exempt and release DELTA BROTHERHOOD INTERNATIONAL, CAMP SAGIN respective members, administrators, officers, directors, volunteers, shareholders, employees, instructors, open well as all of my fellow participants at DELTA 16 (collectively referred to as "Released Parties"), from any and a demands or actions or causes of action whatsoever arising out of any damage or loss to property or harm of an including but not limited to emotional harm, personal injury, infection, disease, or death, while on or off the properticipating in any activity, or while observing any activity, or while being transported or traversing to, from, or premises, or while lodging, eating, or socializing, or while assisting with the setup, operation, or breakdown of or as a result of any rescue efforts or the administering of any first aid or medical treatment contemplated by whether such loss, damage, emotional harm, injury, infection, disease, other harm, or death results from the nactive or passive, of the Released Parties or from some other cause.	rators, and agents, as all liability, claims, by kind to me, remises, or while or within the DELTA 16, or during this Agreement,
3. COVENANT NOT TO SUE. I agree for myself and my estate, heirs, executors, administrators, and assigns, any suit or action at law or otherwise against any of my fellow DELTA 16 participants or other Released Parties harm to me or my property arising from any of the activities contemplated by this Agreement. In the event an initiated, I agree to be responsible for any and all attorney's fees and expenses incurred by the Released Part	as a result of any y suit or action is
4. CHOICE OF LAW and FORUM SELECTION. In the event that any suit or action is initiated, I agree that the Pennsylvania shall apply and that any such suit or action be brought and heard in either the Chester County (P Pleas or the Federal District Court for the Eastern District of Pennsylvania.	law of the State of A) Court of Common () Initial
5. WAIVER I understand that by entering into this Agreement, I am giving up substantial legal rights which I All rights of recovery under the applicable law of any state or territory of the United States, including any right hereby expressly waived. This agreement cannot be changed orally.	may otherwise have. under federal law, ar () Initial
I CERTIFY THAT I AM AT LEAST 21 YEARS OF AGE AND AM LEGALLY COMPETENT TO SIGN THIS AGREEMENT. HAVE CAREFULLY READ THIS LEGAL DOCUMENT AND FULLY UNDERSTAND ITS CONTENTS, AND DO FURTHER INTEND TO BE LEGALLY BOUND HEREBY FOR MYSELF, MY HEIRS, ADMINISTRATORS, AND EXECUTORS.	() Initial
DATED:2016 Month /Day	
SIGNATURE Signature of Participant	
SIGNED AT	
Town or City State/Province WITNESSESED BY	
Print Name of Witness	
WITNESS SIGNATURE	
Signature of Withess	