



Women's Wellness Walks Release and Waiver of Liability

The Women's Wellness Walks series are designed to give individual women from the mid-coast Maine community an opportunity to get outside in community with others, to hike and walk in a variety of challenging environments – on- and off- trails (both maintained, and rough), on roads and streets and in terrain that can be affected by weather and climate in unpredictable ways.

By participating in a Women's Wellness Walk, you understand that you are responsible for your own decisions and safety. You are participating in the Women's Wellness Walk at your own risk. You will travel at your own pace, and make decisions about your own level of participation that are informed by your knowledge of your own capacities and limitations. If at any point you feel fatigue or overexertion, it is expected you will let others of the group (and the facilitator) know, and make your own choices about whether to continue with the walk/hike. You acknowledge that participation in the Women's Wellness Walks exposes you to risk of personal injury, and are fully aware of the risks and how they pertain to you as an individual. By signing this waiver, you release Happier Outside, Michelle T Sommers and any other guest wellness practitioner from any and all liability, negligence and other claims arising from or in any way connected to your participation in the Women's Wellness Walk.

Your signature further acknowledges that you shall not now, nor at any time in the future, bring any legal action against Happier Outside, Michelle T Sommers, or any other guest wellness practitioner; and that this waiver is binding on you, your heirs, spouse, children, legal representatives, successors and assigns.

Your signature verifies that you are physically fit to participate in the walk or hike that you choose to attend, and that (if you are uncertain) you have had a licensed medical doctor verify your fitness for these activities.

Date: _____

Signature: _____

Name: _____

Email: _____

Telephone (best contact number): _____

Address (street, state, zip): _____
