WAIVER OF RIGHTS AND RELEASE OF LIABILITY AND ACKNOWLEDGEMENT OF ASSUMPTION OF RISK

WAIVER OF RIGHTS AND RELEASE OF LIABILITY AND NOTICE OF ASSUMPTION OF RISK FOR RECREATION ACTIVITY

Name:	Address:
SIGNATURE REQU	RED TO PARTICIPATE IN THE FOLLOWING RECREATION ACTIVITY:
Sunriver Resort Golf	Simulator
PLEASE READ CA	REFULLY: THIS FORM RELEASES US FROM LIABILITY
The recreation activity participants to dange	(Golf Simulator) described above and offered at the Sunriver Resort may expose s and risks.
employees, and agen and expenses, includ- activity on property of injury, property dama DAMAGES OR ACT RELEASEES. I here be binding upon my	ver Resort, Hyatt, SRLP and their respective affiliates, subsidiaries, officers, directors, is (hereafter referred to as "Releasees") from any and all claims, actions, damages, costs, ag attorney's fees, as a result of or arising from my participation in the recreation whed, managed and/or controlled by Releasees, including, but not limited to, personal ge or wrongful death. THIS INCLUDES, WITHOUT LIMITATION, ANY CLAIMS, IONS ARISING OR RESULTING FROM THE ORDINARY NEGLIGENCE OF by agree to waive any and all such claims and declare that this Waiver and Release is to eirs, executors, administrators and assigns. Further, I hereby agree to release and es from any loss or theft of, or damage to, personal property.
CLAIM AGAINST NOT KNOW WHA PERSONALLY AS CONNECTION WI FULLY UNDERST	TAND THAT I FOREVER GIVE UP ANY RIGHT TO SUE OR MAKE A THE RELEASEES IF I SUFFER INJURY OR DAMAGE EVEN THOUGH I DO T OR HOW EXTENSIVE THE INJURY OR DAMAGE MAY BE. I HEREBY THE ALL RISKS WHETHER FORESEEN OR UNFORESEEN IN THE ACTIVITY OR ANY ACTIVITIES INCIDENTAL THERETO. I AND AND AGREE THAT THESE TERMS ARE CONTRACTUAL AND NOT A DN AND THAT I HAVE VOLUNTARILY SIGNED THIS DOCUMENT.
	ticipant is 18 years of age or older ticipant is under age 18 and accompanied by a parent or legal guardian
OF LIABILITY AN	WLEDGE THAT I HAVE READ THIS WAIVER OF RIGHTS AND RELEASE D ACKNOWLEDGEMENT OF ASSUMPTION OF RISK, AND I E TERMS AND THEIR LEGAL EFFECT AND MY SIGNING CONSTITUTES UABLE RIGHTS.
Date	Signature of Participant or Parent/Guardian