ASSUMPTION OF RISK, RELEASE AND WAIVER OF ALL LIABILITY

SpiritHeal Institute
The Fullness of Emptiness Retreat
Silver City, New Mexico
November 3 - 8, 2019

This is a legal document. PLEASE READ THE ENTIRE DOCUMENT, SLOWLY AND CAREFULLY. In extremely simple terms, it says that (a) you are aware that the trip to participate in The Fullness of Emptiness Retreat in and around Silver City, New Mexico, involves inherent risks and dangers which could result in your sickness, injury or death, or in loss or damage to your personal belongings, (b) you agree to assume those risks and to be responsible for your own welfare and safety on the trip and (c) you (and your spouse, if you are married) are giving up your right to sue or otherwise bring a claim against the SpiritHeal Institute (the legal name for which is SpiritHeal LLC), Sarah Weiss or her assistants, in the event that any of these risks and dangers do materialize and cause you harm.

SpiritHeal LLC, also known as the SpiritHeal Institute, is an Ohio LLC whose mission is to provide a sacred atmosphere where dignity, mastery and inner wisdom are nurtured and expressed for the benefit of humanity and the planet. Any and all references in this document to "SpiritHeal" shall include SpiritHeal LLC (also known as the SpiritHeal Institute), its Director, officers, directors, staff, employees, volunteers, agents, representatives, instructors, assigns, affiliated persons and organizations or others acting on their behalf, officially or otherwise.

I, ______, plan to participate with SpiritHeal in the "Fullness of Emptiness Retreat, in and around Silver City, New Mexico, including at The Bear Mountain Lodge, 60 Bear Mountain Ranch Rd, Silver City, NM 88061, from the evening of November 3, 2019 through the evening of November 8, 2019, (which retreat, along with all travel related thereto and any and all excursions or recreational activities that I may participate in during the dates of the retreat, regardless of by whom arranged, being hereinafter sometimes referred to as the "Trip".) It is understood and agreed that if I decide to arrive in Silver City, NM, prior to the start time for the Fullness of Emptiness Retreat or remain in Silver City, NM, after the Fullness of Emptiness Retreat has ended, that I am solely responsible for all of my travel, lodging, transport and other arrangements for such time(s) and that they are not part of the Fullness of Emptiness Retreat offered by SpiritHeal.

Assumption of Risk. I fully understand and appreciate that travel to Silver City, NM, and in and around Silver City, NM, including the remote and/or rugged areas in and around Silver City, NM, and the Gila Wilderness, NM, to be visited on this Trip, involves inherent risks and dangers and that despite precautions, accidents and injuries can occur. I understand that the activities I may undertake on the Trip may be potentially dangerous and that I may die, be injured, become ill, suffer loss or damage to personal property or suffer financial loss as a result of my participation in the Trip. I understand that I may experience injury or illness without immediate

access to medical attention, without immediate availability of medical supplies, without rapid means of evacuation should this be necessary and/or where the available standards of medical attention would be considered inadequate in or near a major urban medical center elsewhere in the United States.

Recognizing all of the forgoing, I am voluntarily participating in the Trip with knowledge of the risks and dangers involved. I agree to be responsible for my own welfare and safety on the Trip and I hereby expressly, specifically and voluntarily assume all risks related to my participation on the Trip, including but not limited to the risk of: death, bodily injury, emotional trauma or illness from accidents of any nature whatsoever (whether severe or not, temporary or permanent); loss or injury as a result of a crime or criminal act by third parties, terrorism, war, civil unrest, riot, arrest or other act of government or authority; theft, damage to or loss of any personal property during the Trip or Trip-related travel; loss or death or injury as a result of any natural disaster or event or extreme weather conditions or event; alteration or delay, extension or cancellation of the Trip due to natural disaster, civil unrest, war, terrorist attack, medical quarantine, or any other disturbances or causes. I further acknowledge that the foregoing list is not inclusive of all possible risks associated with the Trip or the facilities, equipment or services which I may encounter on the Trip, and that the above list in no way limits the extent or reach of my assumption of risk in connection with the Trip. I understand that my participation on this Trip is my acceptance of the forgoing risks of injury, death, illness and loss.

Other. I agree that in the event that any clause or provision of this Assumption of Risk, Release and Waiver of All Liability shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Assumption of Risk, Release and Waiver of All Liability which shall continue to be enforceable. I expressly agree that this release and waiver is intended to be as broad and inclusive as permitted under law. This document shall be subject to and interpreted according to the laws of the State of Ohio.

of this Assumption of Risk, Release and Waiver of All Liability, and that I am aware that I am waiving certain legal rights. Trip Participant Print Name: Signature: Date: Address: Witness as to Trip Participant Print Name: Signature: If you have a spouse, they must fill this section out. Spouse of Trip Participant My signature below indicates that I have carefully read and fully understand the provisions of this Assumption of Risk, Release and Waiver of All Liability. I, _____, in consideration of my spouse, ____ being permitted to participate in the Trip, I do hereby freely and voluntarily, without duress, to the fullest extent permitted by law, on behalf of myself, my estate, heirs, personal representatives, executors, administrators, successors and assigns, do hereby forever remise, release, discharge and hold harmless SpiritHeal from any and all liability, claims, demands, grievances and causes of action of every kind whatsoever, of whatever kind or nature, either in law or in equity, including but not limited to claims, demands and liability for any loss, damage, injury, illness, emotional trauma, loss of consortium, death, monetary loss, expense, negligence or property damage of any kind, which arise or may hereafter arise as a result of or in any way related to my said spouse's participation in the Trip, and which I, my estate, heirs, personal representatives, executors, administrators, successors and assigns may now have or have in the future, howsoever the injury is caused, even if SpiritHeal has failed to exercise reasonable care or has engaged in any acts or omissions which under applicable law would constitute ordinary negligence or carelessness. Print name: ______Signature: _____ Witness as to Spouse of Trip Participant Print Name: Signature:

My signature below indicates that I have carefully read and fully understand the provisions

EMERGENCY CONTACT FORM

Name of Participant
Address of Participant
Cell Phone Number of Participant
E Mail Address of Participant
Name of Emergency Contact (please print)
Address of Emergency Contact
Home Phone of Emergency Contact
Work Phone of Emergency Contact
Cell Phone of Emergency Contact
Any further instructions for Medical Personnel?