NEW MEXICO DEPARTMENT OF GAME AND FISH; STATE GAME COMMISSION: ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT. STATE PARKS DIVISION;

FRIENDS OF EAGLE NEST LAKE AND CIMARRON CANYON STATE PARKS RELEASE AND WAIVER FORM

I, (print name)	on my own behalf and on behalf of my heirs, next of kin,
	and assigns, and representatives of any nature whatsoever, for and in
	ermission to access and use certain property owned and operated by the New
	e Energy, Minerals and Natural Resources Department, State Parks Division to
participate in event(s) at the "Eagle Nes	t Lake State Park Polar Bear Challenge"* not sponsored by the Department of
Game and Fish or the State Game Comr	mission to take place at the Eagle Nest Lake on January 1, such authorization
and permission has been granted to me a	at my voluntary request, after having been fully advised of the potential hazards of
	AIVE AND RELEASE all demands, damages, actions, causes of actions, suits and
· · · · · · · · · · · · · · · · · · ·	osts (including attorneys' fees) whether in law or in equity, that I or my heirs, next
	agents and assigns, and representatives of any nature whatsoever might otherwise
	the State Game Commission, the Department of Game and Fish and the Energy,
	ment, State Parks Division, Friends of Eagle Nest Lake and Cimarron Canyon
	employees and representatives, on account of my death or injuries, both to person
	not, which may occur, directly or indirectly, or develop at anytime in the future as
a result of my activities in the above-me	entioned event.
I expressly agree and understand that the	is WAIVER AND RELEASE shall apply for the express purpose of precluding
	costs and attorneys' fees, suits, demands, damages, and causes of action that I or
	strators, estates, agents and assigns and representatives of any nature whatsoever
	States, estates, agents and assigns and representatives of any nature whatsoever

might otherwise assert against any of the aforesaid parties as a result of my association and activities during the abovementioned event and activities. I acknowledge that if I am given treatment for an injury or illness related to my participation in the activity described above or if anyone offers to pay my medical expenses, the treatment or offer to pay cannot be interpreted as an admission of liability or responsibility by the State of New Mexico, the New Mexico Game Commission, the New Mexico

Department of Game and Fish, the Energy, Minerals and Natural Resources Department, or Friends of Eagle Nest Lake and Cimarron Canyon State Parks Division their employees, agents, or any of them. I understand that the activities described above may involve the inherent risks associated with such activity and I

agree that I am participating in that activity after having given due consideration to such inherent risks.

I acknowledge that notwithstanding any other provision of this Agreement to the contrary, no term or condition of this Agreement is intended to be or shall be construed or interpreted as a waiver, either expressed or implied, of any of the immunities, rights, benefits or protection provided to the State of New Mexico, the New Mexico State Game Commission, the New Mexico Department of Game and Fish and the Energy, Minerals and Natural Resources Department, State Parks Division and Friends of Eagle Nest Lake and Cimarron Canyon State Parks under the New Mexico Tort Claims Act, 1978 NMSA 41-4-1 et seq. as amended or as may be amended (including, without limitation, any amendments to such statute, or under any similar statute which is subsequently enacted).

I hereby give permission to State of New Mexico, the New Mexico Game Commission, the New Mexico Department of Game and Fish, the Energy, Minerals and Natural Resources Department, or Friends of Eagle Nest Lake and Cimarron Canyon State Parks Division their and its agents to use my name and photographic/videographic likeness in all forms and media for electronic and print news, advertising, trade, and any other lawful purposes.

I hereby declare that the terms of this WAIVER AND RELEASE have been fully read and understood by me, and I freely and voluntarily entered into and accept all these terms.

*I may participate in either or both of the following	g events: Polar Bea	r Plunge and/or Polar	Bear Stomp/First Day Hike
Signature	Date	Telephone	:
Address:			
Signature of Parent/Guardian if under age 18		Date	Telephone
Emergency Contact Name:	Emergency Telephone Number:		
Witness Name (Print)	(Signature)_		
This Waiver must be provided to the Department of Gar		rgy, Mineral and Natur	

Parks Division, or their designated representative prior to any activity described above being conducted.