

Waiver of Liability

I, (name) _____ acknowledge that I wish to participate in the My Spirit Experience Paranormal Road Trip from August 23rd – August 25th, 2020.

I understand that certain risks are inherent in travel, paranormal investigating, and other activities on this trip and I fully accept those risks. These risks include but are not limited to injury, disease, illness, threat of physical harm from others or from myself, and damage or theft of public/personal property and personal vehicles. I understand there are a great variety of other risks not known or reasonably foreseeable. I acknowledge Heidi Steffens, My Spirit Experience, MPRS, and others associated with this trip are not responsible for any harm or damage that may occur.

I understand and agree that Heidi Steffens, My Spirit Experience, MPRS, and others do not provide insurance to cover expenses for injuries or damage to property and I assure I carry my own health insurance and car insurance if needed related to this trip.

I fully release and discharge Heidi Steffens, My Spirit Experience, MPRS, and all others connected to this trip from all liability in connection with this trip.

Print Signature _____

Signed _____

Date _____