

Northeastern Cave Conservancy, Inc.

RELEASE FORM

Knox Cave Crossbones Cave

Trip Date ___/___/___

The undersigned hereby release the Northeastern Cave Conservancy, their Directors and Officers and Committee Chairmen from any and all harm that may occur to them when visiting Knox or Crossbones Caves, Albany County, New York, and their associated surface property. The undersigned further agree to abide by the rules and regulations as stated in NCC Policy, the General Access Policy and special rules on the Letter of Permission or as stated by any Director, Officer, or Chairman. The undersigned also state that they are all

properly equipped with safe equipment and that they are knowledgeable in its use. Additionally, the undersigned agree that there will be no blasting, explosions, or use of low or high explosives unless special permission is provided for their use. This Release Form and the corresponding Letter of Permission are valid only for the date indicated above. The trip leader shall be responsible for a safe and conservation-minded trip by making certain that the rules and regulations are completely carried out.

PRINT NAME	LEGAL ADDRESS	SIGNATURE
trip leader	trip leader's phone #	