ST. AUGUSTINE ALLIGATOR FARM AND ZOOLOGICAL PARK

WAIVER AND RELEASE OF LIABILITY

(Read Carefully)

In consideration for the opportunity to experience the Crocodile Crossing adventure course, I acknowledge and agree as follows:

I understand that Crocodile Crossing is a physically challenging obstacle course through the treetop canopy over the St. Augustine Alligator Farm and Zoological Park. I understand that the course consists of rope bridges, ladders and zip lines as high as 50 feet above the ground. It is intended to be physically and mentally challenging. It is not for the faint of heart or people who fear heights.

I fully understand and acknowledge that: (a) the Crocodile Crossing adventure course is potentially dangerous; (b) the Crocodile Crossing adventure course will expose me to the risk of personal injury or death from falls, failure to use equipment properly, equipment malfunction, failure to follow instructions and other foreseeable and unforeseeable causes; and (c) the risk of injury or death may arise from the forces of nature, my own negligence or the negligence of other people, including other participants or St. Augustine Alligator Farm employees.

I hereby assume all risks and dangers, and all responsibility for all injuries, losses and damages I may sustain on or as a result of my participating in the Crocodile Crossing adventure course.

On behalf of myself, my personal representatives and heirs, I hereby voluntarily, release, waive, discharge, hold harmless and indemnify St. Augustine Alligator Farm, Inc., its owners, employees, officers and agents (collectively, the "St. Augustine Alligator Farm") from any and all claims, causes of action, losses and damages for bodily injury, wrongful death, loss of services or otherwise that may arise from my participating in the Crocodile Crossing adventure course, including claims based on the theories, negligence, strict liability or otherwise.

I HAVE READ THIS WAIVER AND RELEASE AND BY SIGNING IT I CERTIFY THAT I INTEND TO RELIEVE THE ST. AUGUSTINE ALLIGATOR FARM FROM LIABILITY FOR PERSONAL INJURY OR DEATH RESULTING FROM ITS NEGLIGENCE OR FROM ANY OTHER CAUSE.

Print Name	Age	Date of Birth	Telephone Number

Signature	Address	City, State and Zip

Date