

**Statement of Health
&
INDEMNITY & Hold HARMLESS AGREEMENT**

This Indemnity Agreement (this "Agreement") is entered into as of _____ by and between _____ and Catriona MacGregor

Health: I am in good health and do not suffer from any physical, mental or emotional instability or illness that would make it harmful for me to conduct a Vision Quest.

In consideration of my voluntary participation in the Vision Quest I hereby waive all claims of action against Catriona MacGregor and hereby release, hold harmless, and discharge her from all liability in connection therewith.

Thereby:

For good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, _____ hereby confirms to be in good health and expressly agrees to indemnify and hold harmless Catriona MacGregor, her successors or assigns against all suits, actions, claims, demands, or damages that arise from my participation in the Vision Quest.

SEVERABILITY: If any part or parts of this Agreement shall be held unenforceable for any reason, the remainder of this Agreement shall continue in full force and effect.

BINDING EFFECT: The covenants and conditions contained in this Agreement shall apply to and bind the parties and the heirs, legal representatives, successors and permitted assigns of the Parties.

ENTIRE AGREEMENT: This Agreement constitutes the entire agreement between the Parties. There are no other promises, conditions, understandings or other agreements, whether oral or written, relating to the subject matter of this Agreement.

GOVERNING LAW: This Agreement shall be governed by and construed in accordance with the laws of the State of California.

NOTICE: Any notice required or otherwise given pursuant to this Agreement shall be in writing and mailed certified return receipt requested, postage prepaid, or delivered by overnight delivery service Catriona MacGregor 67 Rocca Drive, Fairfax, CA 94930.

Signed:

Name

Address

Date _____