

**Participant Signature** 

## MPA Hike & Tidepool Exploration Registration

Event: MPA Hike or TidePool Exploration (circle one)  Date:	
Name of Group (if applicable):	
Participant Name (First and Last):	
Street Address:	City, State, and Zip:
Phone:	Phone:
Email:	
Minor Participants (under 18) (If more than space allows, write the remainder on back)	Birthdate:
<ul> <li>Rules of Program: Our OCH™ MPA Hike or Tidepool Exploration is an educational hike/tour and all members who sign up should know the following:         <ul> <li>Location: Hike Begin and End: Little Corona Beach, meet at lifeguard tower</li> <li>What: Marine Protected Area (MPA) Hike along Crystal Cove MPA (from Little Corona to Crystal Cove and back). Hike will be approximately 3 hours and 2.5 miles. This hike is weather and tide permitting, 1.0 low tide or lower for safe exploring.</li> <li>Restrictions: 16 is minimum age to participate in MPA Hike. Any age is allowed in Tidepool Exploration. ALL PARTICIPANTS NEED TO HAVE A FILLED OUT WAIVER BEFORE HIKE.</li> <li>What to wear and bring: clothes you can hike in, a jacket/sweater in case it gets breezy/chilly, water to drink footwear should be lace up running style shoe or hiking shoe for wet and craggy rocks, hat, sunglasses, sunscreen, (binoculars and camera if you want to carry it)</li> </ul> </li> <li>Waiver &amp; Release of Liability: In consideration of the Program, I (We), the undersigned, recognize, agree and acknowledge as follows: (1) participation in the Program is voluntary; (2) Follow and abide by the rules, regulations, guidelines of the Program and the public space being used; (3) Due to the nature of the OCH™ program, all participants (adult and minor) need to be in good health, physically able to participate in the program without restrictions and has no medical condition that would or may cause participation to be potentially hazardous to his/her health; (4) Participant assumes all risks associated with participation in the Program. I hereby, for myself, my child, heir or anyone who might claim on my or my child's behalf, agree not to bring any claim, and waive, release and forever discharge OC Habitats™ and all their officers, agents, employees, and volunteers from any and all duty to me, my child and/or liability for amages arising out of or in the course of my or my chi</li></ul>	

Date