

AFTER-HOURS GHOST HUNT: LIABILITY WAIVER AND RELEASE FORM

Event Details

Event	Adult After-Hours Ghost Hunt
Date & Time	Friday, October 30, 2026 8:00 PM – 12:00 AM (Midnight)
Location	Musser Public Library & HNI Community Center 408 E. 2nd Street, Muscatine, IA 52761
Age Requirement	Adults 18 years of age or older (Advance registration required)

PARTICIPANT INFORMATION

Full Legal Name: _____

Date of Birth: ____ / ____ / _____ Phone Number: _____

Email Address: _____

Emergency Contact Person: _____

Emergency Contact Relationship: _____

Emergency Contact Phone: _____

ACKNOWLEDGMENT, ASSUMPTION OF RISK, AND RELEASE OF LIABILITY

Please read each section carefully before signing.

1. Eligibility & Age Verification

By signing below, I certify that I am at least 18 years of age as of the date of the event. I understand that advance registration and a valid government-issued photo ID are required for entry to this after-hours program.

2. Assumption of Risk

I voluntarily agree to participate in the After-Hours Ghost Hunt at Musser Public Library. I acknowledge that participation in an after-hours paranormal investigation involves inherent risks, including but not limited to:

- Navigating the library building in low-light or dim conditions.
- Physical hazards such as stairs, thresholds, corded equipment, or unforeseen obstacles.
- Psychological or emotional reactions (e.g., surprise, fright, elevated heart rate) associated with ghost hunting themes and low-light environments.

I fully assume all responsibility for any risk of personal injury, illness, property damage, or loss that I may sustain while participating in or traveling to/from this event.

3. Participant Rules and Conduct

By signing, I agree to follow these rules and any instructions from Library staff during the event:

- Stay with my assigned group and staff leader at all times; do not wander alone.
- Enter only areas opened for the event; stay out of any area marked closed or off-limits.
- Do not touch, move, or remove Library materials, equipment, furniture, or archives unless staff invites me to.
- Do not bring or use alcohol, nicotine, vape products, illegal drugs, candles, open flames, smoke machines, Ouijaboards, or weapons.
- Do not attend under the influence of alcohol or drugs.
- Treat other participants and staff with respect; no pranks, deliberate scares, or harassment.
- Treat other equipment with respect and care. Participants assume financial responsibility for damaged equipment.
- Use only flashlights and equipment approved by staff, and keep cords and bags out of walkways.
- Tell staff right away if I am injured, feel unwell, or want to leave the event.

I understand that staff may remove me from the event if I do not follow these rules or staff instructions.

4. Release and Hold Harmless

To the fullest extent permitted by law, I hereby release, waive, discharge, and hold harmless Musser Public Library, the City of Muscatine, their officers, trustees, employees, volunteers, agents, and representatives from any and all liability, claims, demands, actions, or causes of action arising out of or related to any loss, damage, or injury (including death) that may be sustained by me while participating in this program.

5. Medical Emergency Authorization

In the event of a medical emergency, I authorize Musser Public Library staff or designated event leaders to seek emergency medical treatment on my behalf if I am unable to consent. I authorize Musser Public Library staff or designated event leaders to contact my emergency contact. I agree to be financially responsible for any costs incurred as a result of medical care.

6. Photo & Media Release

I grant Musser Public Library permission to use photograph(s), audio, or video recordings taken of me during the event for official promotional, social media, website, or educational purposes without financial compensation. *(Cross out if you wish to opt out).*

PARTICIPANT ACKNOWLEDGMENT & SIGNATURE

I have read this Liability Waiver and Release Form in its entirety. I fully understand its terms, recognize that I am giving up substantial rights by signing it, and sign it freely and voluntarily without any inducement.

Participant Signature: _____

Printed Name: _____

Date: ____ / ____ / ____