

# RIDE THE ROCK RIVER WATER TRAIL

June 21, 2025

**REGISTER NOW**

Registration Deadline: June 18



*Official Inaugural - Rock River Water Trail Trip*

River Guide | Transportation | You Pick Your Launch Time  
Commemorative Tee-Shirt | Morning Snack on the River  
Lunch on the River | Kayaks or Canoes Available  
\$5 - Take 16 Beverage Token

**\$50 per person—kayak or canoe & paddle provided**

**\$40 per person—with your own kayak/canoe  
or 2nd/3rd in canoe**

**TO REGISTER:**

[www.luvernechamber.com](http://www.luvernechamber.com)

213 East Luverne Street

Luverne, 56156

507.283.4061

*Rock River*  
WATER TRAIL

**Registration Form & Liability  
Release on Following Pages**



# RIDE THE ROCK WATER TRAIL

## SATURDAY | JUNE 21, 2025

### Registration Deadline | June 18



Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**TRIP DATE: Saturday, June 21, 2025**

**REGISTER BY: Wednesday, June 18, 2025**

All prices include transportation, food & beverage on the river, Take 16 token and tee-shirt  
Indicate by circling in the box for the time and equipment you select.

**\$40 per person if you provide your own canoe or kayak**

**\$50 per person if we provide the kayak or canoe | Second/third person in a canoe is \$40**

**Each participant must have signed waiver; waiver is on the back page.**

**Under 18 must be accompanied with an adult.**

**YOU MUST PROVIDE YOUR OWN LIFE JACKET and YOU MUST WEAR SHOES!**

**Return registration, waiver & payment to Luverne Area Chamber by June 18th.**

**Cash/Check/Credit Card accepted. Payments won't be processed until June 20th.**

STAGING TIME	TIME ON RIVER	CANOE	SINGLE KAYAK	2ND & 3RD PERSON IN CANOE	PROVIDE YOUR OWN	TOTAL
8:30 AM	9:30 AM	\$50	\$50	\$40	\$40	
9:00 AM	10:00 AM	\$50	\$50	\$40	\$40	
9:30 AM	10:30 AM	\$50	\$50	\$40	\$40	
10:00 AM	11:00 AM	\$50	\$50	\$40	\$40	
10:30 AM	11:30 AM	\$50	\$50	\$40	\$40	

<b>BLUE OR GRAY INDICATE COLOR</b>						
CIRCLE SIZE	SMALL	MEDIUM	LARGE	X-LARGE	XX-LARGE	XXX-LARGE

**Luverne Area Chamber—213 E. Luverne St.**  
**Www.LuverneChamber.com**

**Luverne MN 56156—507.283.4061**  
**luvernechamber@co.rock.mn.us**

# CANOE & KAYAK RENTAL AGREEMENT RELEASE OF LIABILITY

## RIDE THE ROCK WATER TRAIL ADVENTURE

Saturday | June 21, 2025

Participant Release of Liability and Assumption of Risk Agreement

PLEASE READ BEFORE SIGNING

Organization Name: LUVERNE AREA CHAMBER & CVB



Participant's Name: \_\_\_\_\_

Please Print Only

In consideration of being allowed to participate in any way in the program, related events and activities, I, the undersigned acknowledge, appreciate and agree that:

- The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis or death.
- I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the event organizers and sponsors and assume full responsibility for my participation.
- I willingly agree to comply with the terms and conditions for participation which include wearing of shoes at all times during the trip, lunch and beverages served, wearing of life vest and requirement to listen to the organizers of the trip among others. If I observe any unusually significant hazard during my participation and in my presence, I will safely removed myself from participation and bring the attention of the hazard to the nearest organizer immediately.
- I, for myself and on behalf of my heirs, personal representatives and next of kin hereby release, indemnify and hold harmless Luverne Area Chamber & CVB, its officers, officials, agents, employees, other participants, sponsors, advertisers and owners of property and equipment that we are on and use during the trip from any and all claims, demands, losses and liability arising out of or related to any injury, disability or loss of life that occurs, or loss or damage to person or property, whether arising from the negligence of event planners or otherwise as allowed by law.
- I have read this Release of Liability and Assumption of Risk Agreement. I fully understand its terms. I understand that I have given up substantial rights by signing this agreement and sign it freely and voluntarily without any inducement or coercion.

\_\_\_\_\_  
Participants Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Age

### FOR PARENTS OR GUARDIANS OF PARTICIPANT OF MINOR AGE (Under Age 18 At Time of Event)

This is to certify that I, as parent or guardian with legal responsibility for this participant, do consent and agree to this release as provided above, and for myself, my heirs and next of kin, I release and agree to indemnify and hold harmless Luverne Area Chamber & CVB and its partners, agents, employees and officials from any and all liability incidents to my minor child's involvement or participation in these programs as provided above, even if arising from the negligence of the event planners and operators, as permitted by law.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Emergency Phone Number