

COMPLETE RELEASE OF HOPES FLOAT, INC.

I, _____, of _____,
_____, _____ County, _____, hereby
acknowledge that I have voluntarily applied to participate in Hopes Float, Inc.'s programs. I further acknowledge
that I have been advised about the potentially dangerous nature of the program, including the use of a pontoon boat
on various Colorado lakes. I realize that I will be on a pontoon boat in open water and that there is a real possibility
that I may be subjected to swimming or being in cold open waters. I understand that I will be engaging in strenuous
physical activity both on and off the boat. I hereby represent, warrant and covenant that I have determined, by my
own physical examinations, check ups, and permission from my doctors, that I am in sufficient good health to fully
participate in all Hopes Float, Inc.'s activities. I understand that Hopes Float, Inc. is relying on my own assessment
that I can safely participate in the proposed activities.

In consideration of being permitted to participate in Hopes Float, Inc.'s programs, I hereby release, waive,
discharge, hold harmless, indemnify and covenant not to sue Hopes Float, Inc., its owners, shareholders, directors,
officers, agents, instructors, employees, lessees, lessors, boat owners, affiliates, sponsors, related churches such as
Lifebridge, or their successors or assigns (hereinafter referred to collectively as Hopes Float, Inc.). This release is
given to Hopes Float, Inc. as a complete release for all claims of any kind that I may possess at any time against
Hopes Float, Inc. This release to Hopes Float, Inc. includes a release for any and all liability to me, my personal
representatives, assigns, heirs, and next of kin, for all losses or damages of any kind, including but not limited to any
claim for damages on account of any and all personal injuries to me (for example, loss of enjoyment of life, loss of
income or loss of future income or income potential, damages to my property, damages or loss of use of my body,
damages for any emotional injuries, or losses or damages resulting in my death). This release applies to all risks
connected with Hopes Float, Inc.'s activities, whether said risks are foreseeable or unforeseeable.

I assume full responsibility for any and all risk of property damage, bodily injury, or death, due to Hopes Float,
Inc.'s negligence, or otherwise, while participating in any of the Hopes Float, Inc.'s activities. I assume full financial
and legal responsibility for all costs associated with any losses, damages or claims suffered by Hopes Float, Inc. or
any third party due to my conduct. I represent that I have full coverage medical and hospitalization insurance that
will provide for any medical needs associated with my Hopes Float, Inc.'s activities. I assume full financial
responsibility for any medical and hospitalization costs associated with my Hope's Float, Inc.'s activities. I assume
all legal costs associated with enforcing the terms of this Release.

I expressly acknowledge and agree that the Hopes Float, Inc.'s fishing activities may be very dangerous and involve
the risk of property damage and/or serious injury and/or death. I assume those risks. I further expressly agree that
the foregoing release and waiver agreement is intended to be as broad, far reaching, and inclusive as is permitted by
the law of the State of Colorado, and that if any portion of it is held invalid, it is agreed that the balance shall,
notwithstanding, continue in full legal force and effect.

I am of lawful age and legally competent to sign this release; I understand the terms herein are contractual and not
mere recital; and I have signed this document as my own free act. In addition, I agree that no oral representations,
statements, or inducements apart from the foregoing written agreement have been made.

In witness whereof I have executed this affirmation and release at _____, on _____ day of
_____, 2003.

Witness:
