

2011 Wapsi Warrior Challenge

Waiver & Release of all claims & assumption of risk

I recognize and acknowledge that there are certain risks of physical injury to participants in Wapsi Warrior Challenge, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in these activities against Independence Celebrations Committee, Inc. including its officials, agents, volunteers, sponsors, and employees (hereinafter collectively referred to as Independence Celebrations Committee, Inc. or Wapsi Warrior Challenge). I do hereby fully release and forever discharge Independence Celebrations Committee, Inc. from any and all claims for injuries, illnesses, damages, expenses, or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with the race, program or activities. I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. Independence Celebrations Committee, Inc. is committed to conducting its race and activities in a safe manner and holds the safety of participants in high regard. Independence Celebrations Committee, Inc. continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for the race, programs/activities must recognize that there is an inherent risk of injury when choosing to participate in recreational activities/programs. I am solely responsible for determining if I or my minor child/ward is physically fit and/or skilled for the race or activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant or disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity. I do hereby fully release and forever discharge Independence Celebrations Committee, Inc. from any and all claims for injuries, damages or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with these programs/activities.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims.

**I HAVE READ THIS AGREEMENT, WAIVER AND RELEASE, AND AGREE TO ACCEPT ITS TERMS.
I AM 18 YEARS OF AGE.**

PARTICIPANT NAME

PARTICIPANT SIGNATURE

DATE

ONLY AGREE BELOW SECTION IF YOU ARE A PARENT OR GUARDIAN OF A PARTICIPANT UNDER THE AGE OF 18

I, the parent or guardian of the above named participant, hereby give my approval to this child's participation in the race and its activities. I assume all risks and hazards incidental to such participation in Wapsi Warrior Challenge, and I hereby waive, release, absolve, indemnify, and agree to hold harmless Independence Celebrations Committee, Inc., its officers, heirs, assigns, administrators, personal representatives and executors, firms, corporations, businesses, and past and present employees, owners, agents, shareholders, volunteers, administrators, sponsors, supervisors, participants, all city, county, and state governments, and all sponsors, their representatives and successors and others persons, for any claim arising or of an injury to my/our child and from any and all claims, causes of actions, obligations, lawsuits, charges, complaints, contracts, controversies, covenants, agreements, promises, damages, costs, expenses, responsibilities, of whatsoever kind, nature or description, whether, direct or indirect, in law or in equity, in contract or in tort, or otherwise, whether known or unknown, from all claims or liabilities of any kind arising out of or connected with my child(ren)'s participation in this event. I consent to the foregoing and grant permission for him/her to participate in Wapsi Warrior Challenge. I acknowledge I have carefully read, accepted and agreed to the terms on this Release and Liability waiver, and know and understand their contents and I sign the same on my own free act and deed.

_____ **PARTICIPANT IS UNDER 18 YEARS OF AGE** (check mark if true)

PARTICIPANT NAME

PARTICIPANT SIGNATURE

DATE SIGNED

SIGNATURE OF PARENT/GUARDIAN