

## **EVENT RELEASE AND WAIVER OF LIABILITY FORM**

This Release and Waiver of Liability (the "Release	ase") executed on	(date), by
3. MEDICAL TREATMENT: I hereby Release and forever discharge the participating entities from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during my tenure as an event participant with the Organization.		
4. ASSUMPTION OF RISKS: I understand that t and dangers. As a participant, I hereby expreselease ALL participating entities from all liabil participation or occurring while I am participat	ssly assume the risk of injury or harr ity for injury, illness, death, or proper	m from my participation and ty damage resulting from my
5. PHOTOGRAPHIC RELEASE: I grant and convey to the event organizers all right, title, and interests in any and all photographs, images, video, audio in connection with my participating in this event for the Organization.		
6. OTHER: As a participant, I expressly agree that by the laws of the State of North Carolina and the with the laws of the State of North Carolina. It is deemed invalid, the enforceability of the ren	nat this Release shall be governed by a agree that in the event that any claus	and interpreted in accordance e or provision of this Release
By signing below, I express my understanding a and voluntarily.	nd intent to enter into this Release ar	nd Waiver of Liability willingly
Signature of Participant	Print Name	Date
If participant is under the age of 18, a parent/g	uardian must read and sign this Relea	ase/Waiver of Liability form.
Signature of Parent/Guardian	Print Name	Date