

4 MAN/3 BIKE RELAY WAIVER

PLEASE INCLUDE THIS WAIVER FOR EACH PARTICIPANT. IF UNDER 18 YEARS OLD HAVE YOUR PARENT OR LEGAL GUARDIAN SIGN THE WAIVER

Waiver Release: I hereby certify the following: (1) I am medically able and properly trained to participate in the 4 man/3 bike relay; (2) I further agree in the event of an injury or accident that event officials may authorize necessary treatment for me and I further authorize the American Medical Response (AMR), Olympia Fire Dept. (OFD) or any other medical treatment provider to furnish to the event organizers my name, telephone number, and if applicable, the name of any hospital or medical facility I was transported to as a result of any injury or medical problem that arose out of this event; (3) I further grant the 4 man/3 bike relay specific permission to reproduce, publish, circulate, copyright, or otherwise use an and all photographs and/or videotape of me and/or my family, taken at the event; and (4) Having read this waiver and knowing these facts, and in consideration of the acceptance of my entry into this event, I hereby for myself, my heirs, executors, administrators or anyone else who might claim on my behalf, covenant not to sue, and waive, release and discharge all subsidiaries, affiliates, assigns, representatives and successors of the foregoing: The Cities of Olympia, Lacey, or Yelm and Police Department, Fire Department, and all event sponsors associated with these or any other cities located in the race route, suppliers, agents, independent contractors, employees and any other personnel in any way assisting or connected with the 4 man/3 bike relay from any and all claims of liability of any kind whatsoever

Entries cannot be accepted without a valid signature.

Entries from minors will only be accepted with a parent or legal guardian's signature.

Participant Name _____

Signature _____ Date _____