

LIABILITY WAIVER AND HOLD HARMLESS AGREEMENT

1. I acknowledge that my participation in 47th FTW Adventure Race is completely voluntary. I HEREBY VOLUNTARILY ASSUME THE RISKS OF PARTICIPATING IN THE 47TH FTW ADVENTURE RACE.

2. In consideration of the United States Air Force and Laughlin Air Force Base allowing my participation in the 47th FTW Adventure Race, I hereby state the following:
 - a. I WAIVE, RELEASE, AND DISCHARGE the United States Air Force, Laughlin Air Force Base, and any of its officers, employees, representatives, or agents from any and all claims, losses, or liabilities for death, personal injury, partial or permanent disability, property damage, medical or hospital bills, theft, or damage of any kind, including economic losses, which may arise by reason of my participation in the 47th FTW Adventure Race. To the extent possible by law, I hereby fully waive, release, and discharge all parties notwithstanding their own negligent acts or omissions or the negligent acts or omissions of others.
 - b. I agree that I will not bring any action or claim against the parties hereby released for any reason associated my participation in the 47th FTW Adventure Race.
 - c. I INDEMNIFY AND HOLD HARMLESS the parties hereby released from any and all claims made or liabilities assessed against them as a result of my participation in the 47th FTW Adventure Race.

I HEREBY AFFIRM THAT I AM EIGHTEEN (18) YEARS OF AGE OR OLDER (MINORS, AGED 16 OR 17 MUST INCLUDE THE SIGNATURE OF THEIR PARENT OR GUARDIAN)(TEAMS MAY ONLY HAVE A RATIO OF 1:1, RESPONSIBLE ADULT:16 OR 17 YEAR OLD PARTICIPANT). I HAVE READ THIS DOCUMENT AND I UNDERSTAND ITS CONTENTS. I ACKNOWLEDGE THE I AM FULLY AND VOLUNTARILY WAIVING ALL LIABILITY THAT MAY ARISE BY REASON OF PARTICIPATION AND/OR USE OF THIS PROGRAM AFTER FULL CONSIDERATION OF THE RIGHTS I AM WAIVING. THIS WAIVER IS IN CONSIDERATION OF MY BEING ALLOWED TO PARTICIPATE IN AND/OR USE THIS PROGRAM.

Printed Name

Signature

Date

(if 16 or 17 year old)Printed Name of Parent or Guardian

Signature of Parent or Guardian

Date