

First Name:

Last Name:

Address:

City:

State:

Phone:

e-mail:

**HALLOWEEN DASH WAIVER & RELEASE OF CLAIMS, ASSUMPTIONS OF RISK AND CONSENT TO MEDICAL TREATMENT ("WAIVER") PLEASE READ THIS DOCUMENT CAREFULLY AS IT AFFECTS YOUR FUTURE LEGAL RIGHTS AND PROVIDE YOUR INITIALS ON EACH LINE AFTER READING**

As used herein, the term "Releases" is defined to include: (i) Scott's Yankee Farmer, members, employees, affiliated companies, successors assigns; (ii) Event Volunteers; (iii) city, county or state government(s); and (iv) any Event sponsor or advertisers.

- ☐ 1) I understand that the event involves obstacles, including, but limited to climbing over, through and under objects, running through mud, rocks, and uneven terrain.
- ☐ 2) I understand that participating in the event involves the risk of physical injury.
- ☐ 3) I voluntarily, knowingly and freely assume all risks associated with my child's participation in this event, including, but not limited to, his/her own actions or inactions, the actions or inactions of others (including participants, spectators and Releases), falls, injuries, illnesses, infections, contact with others, completing any and all obstacles, premises defects and the effects of weather.
- ☐ 4) I certify that my child is physically fit and has no medical condition that would make participation in the event more hazardous.
- ☐ 5) I attest that on the date of the event my child will possess and be covered by medical insurance, individually or as part of an organization
- ☐ 6) I consent to medical care and transportation in order to obtain treatment in the event of injury to my child as, Scott's Yankee Farmer, volunteers, or medical professionals may deem appropriate and understand that this waiver extends to any liability arising out of or in any way connected with such medical treatment and transportation provided in the event of emergency and/or injury.
- ☐ 7) I consent to the use of photos or recordings from the event can be used in the event's advertising, marketing or promotion.

I acknowledge that I have read and fully understood the important information above. I sign on my own free act and deed that I understand that I have given up legal rights by signing below.

I acknowledge that this waiver is consideration for permission of my child to participate in the event and my child's participation in the event will be denied if my signature does not appear on this waiver.

I, the parent or guardian of the above named participant ("Minor"), give my approval for Minor's participation in the event. I assume all risks and hazards incidental to Minor's participation in the event and I release, wave discharge, absolve, indemnify, agree to hold harmless and covenant not to sue the Releasees for any claim arising out of an injury to the Minor and from any and all claims, causes of action, obligation, lawsuits, charges, complaints, controversies, damages, costs or expenses of any kind, nature, or description, whether direct or indirect, in law or in equity, in contract or in tort, or to otherwise, whether known or unknown, arising out of or connected with Minor's attendance at the participation in the event, whether or not caused by the Releasees' negligence or gross negligence. I consent to the forgoing, grant permission for Minor to participate in the event and acknowledge that I have carefully analyzed, accepted and agreed to the terms of this waiver, know and understand its contents and sign below on my own free act and deed.

Signature:

Date: