



Waiver and Release of Liability for Storm the Stairs Run/Walk

1. I understand that in order to be allowed to participate in the Event, I agree to assume all risks and to release and hold harmless United Way of Trail and District (UWTD) and their officers, employees, agencies, sponsors and volunteers including all governmental and public entities including, but not limited to, the local municipality where the event takes place (collectively the "Released Parties").
2. I intend by this Waiver and Release to release, in advance, and to waive my rights and discharge all of the persons and entities mentioned above, from any and all claims for damages for death, personal injury or property damage which I may have, or which may hereafter accrue to me as a result of my participation in the Event. I understand and agree that this Waiver and Release is binding on my heirs, assigns, and legal representatives.
3. I understand that I am solely responsible for my health and safety, and I acknowledge that I am physically capable of participating in and completing this Event.
4. I agree to allow UWTD and their contractors, agencies and sponsors, the use of my name and likeness in connection with Storm the Stairs Run/Walk, for any purpose related to advertising or promotion of the event in perpetuity in all forms of media now and forever known.
5. I have carefully read this Waiver and Release and fully understand its contents. If I am under 18 years of age at the time of registration, my parent or legal guardian has completely reviewed this Waiver and Release, understands and consents to its terms, and authorizes my participation by his/her signature below. I am aware that this is a RELEASE OF LIABILITY and a contract between me and the persons and entities mentioned above and I sign of my own free will.

Signature: _____

Date: _____

Signature of parent or guardian if participant is under 18 years of age. (This form must be submitted to the United Way of Trail & District within 30 days of participant's registration.)

Parent/Guardian Signature: _____

Date: _____

Please submit to the address below.