

Participant Waiver



By entering your name on this document you acknowledge you have read and you understand the INFORMED CONSENT/RELEASE OF LIABILITY printed below.

INFORMED CONSENT/RELEASE OF LIABILITY: I understand that participation in the Made to Move Challenge presents certain risks and hazards, including but not limited to: muscle strains and sprains, bruises, broken limbs, dehydration, other serious medical problems or even death and other ordinary risks associated with strenuous physical activity. I acknowledge I do not have a past or present medical condition that may be affected by participating in this Activity or that I have obtained clearance from a physician before participating in this Activity. I voluntarily assume full and complete responsibility for any injury or accident, which may occur to me or my property during or in connection with this event. I hereby voluntarily Release, Waive, and Discharge _____ [Group name], and their servants, agents, employees, participants, and volunteers assisting with this event (hereinafter "RELEASEES") from any and all liability, claims, demands, actions and causes of action whatsoever, whether such liability is based on negligence, arising out of or related to any loss, damage, or injury that may be sustained by me or to any property belonging to me while participating in the event. I further agree to Indemnify and Hold Harmless the Releasees from any loss, liability, damage or costs, I may incur due to my participation in this Activity. This Agreement also shall bind the members of my family and spouse (if any).

Name	Signature	Date