



2019 Cooper River Dragon Boat Festival

WAIVER of LIABILITY RELEASE INDEMNIFICATION AND HOLD HARMLESS NOTICE



I, _____, have read the following waiver and indemnification notice and by signing, have agreed to the following In consideration of being allowed to participate in any way in the Cooper River Dragon Boat Festival, related events and activities. The undersigned acknowledges, appreciates and agrees that the events are for the 2019 Cooper River Dragon Boat Festival practices prior to the festival and the festival races held on July 27, 2019. All Practices and races will be held on Cooper River in Camden County Park in Pennsauken, New Jersey.

1. The risk of injury from the activities involved in this program is significant including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist: and;

2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, assume full responsibility for my participation; and,

3. I willingly agree to comply with the stated and customary terms and conditions for participation. If however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,

4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release and hold harmless the River Sirens, United States Dragon Boat Federation, Camden County Board of Chosen Freeholders, Camden County, 22 Dragons and their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event (Releases), with respect to any and all injury, disability, death, or loss or damage to person or property, whether arising from the negligence of the Releases or otherwise.

5. I understand that at this event or related activities, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers, and assigns.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING THIS AND DO SO VOLUNTARILY, WITHOUT INDUCEMENT.

FOR PARTICIPANT UNDER AGE 18 AT THE TIME OF REGISTRATION: My signature certifies that I, as parent/guardian with legal responsibility for this participant's, do consent and agree to his/her release as provided above, of all the releases, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releases from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

In signing this waiver, I acknowledge and represent that I have read and understand this release and agree to it voluntarily. I further understand that I am specifically waiving certain rights by this release to which I may have otherwise been entitled. I also allow my photograph to be used I attest that I am 18 years of age and of sound mind. If under 18 years of age, parent /guardian signature is required.

LAST NAME, FIRST NAME TEAM NAME

ADDRESS (Nº, STREET, APT., CITY, POSTAL CODE)

EMAIL PHONE/CELL PHONE DATE OF BIRTH

DO YOU HAVE A MEDICAL CONDITION OUR STAFF SHOULD BE AWARE OF (SPECIFIED)?

CONTACT PERSON IN CASE OF AN EMERGENCY PHONE NUMBER TO CONTACT THIS PERSON

SIGNATURE DATE

SIGNATURE OF PARENT/GUARDIAN (IF UNDER 18) DATE