

G.L.O.W. Conferences Waiver and Release of Liability

In consideration of any risk of injury while participating in Global Leaders for Organizational Welfare Conferences, and as consideration for the right to participate in the Conference, I hereby, for myself, my heirs, executors, administrators, or personal representatives, knowingly and voluntarily enter into this waiver and release of liability and hereby waive any and all rights, claims or causes of action of any kind whatsoever arising out of my participation in the

Conference, and do hereby release and forever discharge Global Leaders for Organizational Welfare, ssak@glowconferences.org, located in Los Angeles, held in Napa Valley, California, 94558-94559, their affiliates, managers, members, agents, attorneys, staff, volunteers, heirs, representatives, predecessors, and successors for any physical or psychological injury, including but not limited to illness, paralysis, death, damages, economical or emotional loss, that may suffer as a direct result of my participation in the aforementioned Conference, including traveling to and from an event related to this Conference.

I AM VOLUNTARILY PARTICIPATING IN THE AFOREMENTIONED CONFERENCE AND I AM PARTICIPATING IN THE CONFERENCE ENTIRELY AT MY OWN RISK. I AM AWARE OF THE RISKS ASSOCIATED WITH TRAVELING TO AND FROM AS WELL AS PARTICIPATING IN THIS CONFERENCE, I UNDERSTAND THAT INJURIES OR OUTCOMES MAY ARISE FROM MY OWN OR OTHERS' NEGLIGENCE, CONSITIONS RELATED TO TRAVEL, OR THE CONDITION OF THE CONFERENCE LOCATION (S). NONETHELESS, I ASSUME ALL RELATED RISKS, BOTH KNOWN AND UNKNOWN TO ME, OF MY PARTICIPATION IN THIS CONFERENCE, INCLUDING TRAVEL TO, FROM AND DURING THIS CONFERENCE.

I agree to indemnify and hold harmless Global Leaders for Organizational Welfare against any and all claims, suits, or actions of any kind whatsoever for liability, damages, compensation or otherwise brought by me or anyone on my behalf, including attorney's feed and any related costs, if litigation arises pursuant to any claims made by me or by anyone else acting on my behalf. If Global Leaders for Organizational Welfare incurs any of these types of expenses, I agree to reimburse Global Leaders for Organizational Welfare.

I acknowledge that Global Leaders for Organizational Welfare and their co-founders, directors, officers, volunteers, representatives and agents are not responsible for errors, omissions, acts or failures to act of any party or entity conducting a specific event or event at the Conference on behalf of Global Leaders for Organizational Welfare.

I ACKNOWLEDGE THAT ALL PAYMENTS MADE ARE NON-REFUNDABLE AND TAKE FULL RESPONSIBILITY IN PARTICIPATING AT THE GLOBAL LEADERS FOR ORGANIZATIONAL WELFARE CONFERENCES. The risks may include, but are not limited to, those caused by terrain, facilities, temperature, weather, lack of hydration, condition of participants, equipment, vehicular traffic and actions of others, including but not limited to, participants, volunteers, spectators, coaches, event officials, and event monitors, and/or producers of the event.

To the extent that statue or case law does not prohibit releases for negligence, this release is also for negligence on the part of Global Leaders for Organizational Welfare, Global Leaders for Organizational Welfare Conferences, Global Leaders for Organizational Welfare Journal, its agents and employees.

In the event that I should require medical care or treatment I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance.

In the event that any damage to equipment or facilities occurs as a result of my or my family's willful actions, neglect or recklessness, I acknowledge and agree to be held liable for any and all costs associated with any actions of neglect or recklessness.

	nto at arm's-length, without dure es of equal bargaining strength. B		nterpreted as an
admitted to alter or explain th	, a lear and unambiguous as to its te e terms of this Agreement, but th ses for which it is entered into.		
invalid, or if any term, condition otherwise unenforceable, the clause severed does not affect	n contained within this Release of on, phrase or portion of this agree remainder of this agreement shal the intent of the parties. If a cour enforceable, then said provision s	ement shall be determined to I remain in full force and effort should find that any provis	o be unlawful or ect, so long as the sion of this
In the event of an emergency,	please contact the following pers	on(s) in the order presented	l:
EMERGENCY CONTACT	CONTACT RELATIONSHIP	CONTACT TELEPHONE	
agreement. I certify that I have	, affirm that I am of the age 18 year e read this agreement, that I fully n aware that this is a release of lia	understand its content and	that this release
Participants Name:			
Participants Home Address:	<u>- </u>		
Signature of Participant:			
Date:			