



2019 KENAI PENINSULA RACING LIONS TWIN CITY RACEWAY ANNUAL RELEASE AND WAIVER OF LIABILITY ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

IN CONSIDERATION OF BEING PERMITTED TO COMPETE, OFFICIATE, OBSERVE, WORK FOR, OR PARTICIPATE IN ANY WAY IN THE EVENT(S) OR BEING PERMITTED TO ENTER FOR ANY PURPOSE ANY RESTRICTED AREA (DEFINED AS ANY AREA REQUIRING SPECIAL AUTHORIZATION, CREDENTIALS OR PERMISSION TO ENTER OR ANY AREA TO WHICH ADMISSION BY THE GENERAL PUBLIC IS RESTRICTED OR PROHIBITED, INCLUDING BUT NOT LIMITED TO THE COMPETITION AREA AND ANY HOT PIT AREA), EACH OF THE UNDERSIGNED, FOR HIMSELF, HIS PERSONAL REPRESENTATIVES, HEIRS, AND NEXT OF KIN:

1. ACKNOWLEDGES, AGREES AND REPRESENTS THAT HE/SHE HAS OR WILL IMMEDIATELY UPON ENTERING ANY SUCH RESTRICTED AREAS, AND WILL CONTINUOUSLY THEREAFTER, INSPECT THE RESTRICTED AREAS WHICH HE ENTERS AND HE FURTHER AGREES AND WARRANTS THAT, IF AT ANY TIME, HE IS IN OR ABOUT RESTRICTED AREAS AND HE FEELS ANYTHING TO BE UNSAFE, HE WILL IMMEDIATELY ADVISE THE OFFICIALS OF SUCH AND WILL LEAVE THE RESTRICTED AREA PRIOR TO THE EVENT.

2. HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE THE PROMOTERS, PARTICIPANTS, RACING ASSOCIATIONS, SANCTIONING OR ADMINISTRATIVE ORGANIZATIONS OR ANY AFFILIATED ENTITIES THEREOF, TRACK OPERATIONS, TRACK OWNERS, OFFICIALS, CAR OWNERS, DRIVERS, PIT CREWS, RESCUE PERSONNEL, AND ANY PERSONS IN ANY RESTRICTED AREA, PROMOTERS, SPONSORS, ADVERTISERS, OWNERS, LESSORS AND LESSEES OF PREMISES USED TO CONDUCT THE EVENT(S), PREMISES AND EVENT INSPECTORS, SURVEYORS, UNDERWRITERS, BROKERS, CONSULTANTS AND OTHERS WHO GIVE RECOMMENDATIONS, DIRECTIONS, OR INSTRUCTIONS, OR ENGAGE IN RISK EVALUATION OR LOSS CONTROL ACTIVITIES REGARDING THE PREMISES OR EVENT(S) AND FOR EACH OF THEM, THEIR DIRECTORS, OFFICERS, AGENTS, AND EMPLOYEES, ALL FOR THE PURPOSES HEREIN REFERRED TO AS "RELEASEES", FROM ALL LIABILITY TO THE UNDERSIGNED, HIS PERSONAL REPRESENTATIVES, ASSIGNS, HEIRS, AND NEXT OF KIN, FOR ANY AND ALL LOSS OR DAMAGE, AND ANY CLAIM OR DEMANDS THEREFORE ON ACCOUNT OF INJURY TO THE PERSON OR PROPERTY OR RESULTING IN THE DEATH OF THE UNDERSIGNED ARISING OUT OF OR RELATED TO THE EVENT(S), WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

3. HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS THE RELEASEES AND EACH OF THEM FROM ANY LOSS, LIABILITY, DAMAGE, OR COST INCLUDING BODILY INJURY OR PROPERTY DAMAGE THEY MAY INCUR ARISING OUT OF MY PRESENCE OR PARTICIPATION IN THE EVENT(S) WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

4. HEREBY ASSUMES FULL RESPONSIBILITY FOR ANY RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE ARISING OUT OF OR RELATED TO THE EVENT(S) WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

5. HEREBY ACKNOWLEDGES THAT THE ACTIVITIES OF THE EVENT(S) ARE VERY DANGEROUS AND INVOLVE THE RISK OF SERIOUS INJURY AND/OR DEATH AND/OR PROPERTY DAMAGE. EACH OF THE UNDERSIGNED ALSO EXPRESSLY ACKNOWLEDGES THAT INJURIES RECEIVED MAY BE COMPOUNDED OR INCREASED BY NEGLIGENT RESCUE OPERATIONS OR PROCEDURES OF THE RELEASEES.

6. HEREBY AGREES THAT THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENTS EXTENDS TO ALL ACTS OF NEGLIGENCE BY THE RELEASEES, INCLUDING NEGLIGENT RESCUE OPERATIONS AND IT INTENDED TO BE AS BROAD AND INCLUSIVE AS IS PERMITTED BY THE LAWS OF THE PROVINCE OR STATE IN WHICH THE EVENT(S) IS/ARE CONDUCTED AND THAT IF ANY PORTION THEREOF IS HELD INVALID, IT IS AGREED THAT THE BALANCE SHALL, NOTWITHSTANDING, CONTINUE IN FULL LEGAL FORCE AND EFFECT.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST ALLOWED BY LAW.

PRINTED NAME OF PARTICIPANT: _____

PARTICIPANT'S SIGNATURE: _____

MAILING ADDRESS: _____

CITY/STATE/ZIP: _____

CONTACT PHONE: _____

DATE: _____

PRINTED NAME OF PARENT/GUARDIAN: _____

PARENT/GUARDIAN SIGNATURE (IF PARTICIPANT IS UNDER THE AGE OF 18): _____

(IF NOTARIZED) SUBSCRIBED AND SWORN TO AT: _____ BEFORE ME

THIS _____ DAY _____ A.D. 20 _____ COUNTY, STATE OF _____

MY COMMISSION EXPIRES: _____