



LIABILTY WAIVER FORM 202_

THE UNDERSIGNED PARTICIPANT RELEASES AND FOREVER DISCHARGES THE ORGANIZATION KNOWN AS VETERANS AFIELD U.A. ALONG WITH ALL OF IT'S OFFICERS AND DIRECTORS FROM ANY AND ALL CLAIMS, DEMANDS, ACTIONS, CAUSES, ACTIONS OR SUITS ARISING OUT OF ANY INJURIES KNOWN OR UNKNOWN WHICH HAVE RESULTED IN WITH THE PARTICIPANTS ACTIONS DURING A VETERANS AFIELD U.A. EVENT.

THE UNDERSIGNED PARTICIPANT HEREBY ASSUMES ALL RISK OR INJURY INVOLVED WITH ANY VETERANS AFIELD U.A. EVENT AND FULLY INDEMNIFIES AND HOLDS HARMLESS ANY OF IT'S OFFICERS OR DIRECTORS FROM AND AGAINST EACH AND EVERY LIABILITY LOSS COST DAMAGE, AND EXPENCE INCLUDING ATTORNEY FEE'S WHERE AS AN INJURY MAY OCCUR DURING THE PARTICIPATION IN ANY VETERAN AFIELD U.A. EVENT

THIS LIABILITY WAIVER APPLIES TO THE PARTICIPANT AND OR SPONSOR AS SIGNED FOR BELOW.

PARTICIPANTS NAME PRINT. _____
LAST FIRST

PARTICIPANTS SIGNATURE _____

DATE MONTH ____ / DAY ____ / YEAR ____

RECEIVED BY P.D.HORVATH MONTH ____ / DAY ____ / YEAR ____

PATRICK.D, HORVATH / VETERANS AFIELD U.A.

SIGNATURE _____