Waiver Release of Liability and Indemnification Exhibitor/Parent/Legal Guardian Waiver Form

| Exhibitor: | |
|------------------------|--|
| Parent/Legal Guardian: | |
| Address: | |
| Phone: | |
| | |

WAIVER OF PHYSICAL DAMAGE OR INJURY

The Branch County Fair strives to conduct its programs and activities in a safe manner, and they hold the safety of participants in the highest regard. Participants and parents registering their child(ren) in the fair programs must recognize however that there is an inherent risk of injury when choosing to participate in any activity. The Branch County Fair continually strives to reduce such risks and insists that all participants follow safety rules and instructions which have been designed to protect the participant's safety.

Please recognize that the Branch County Fair does not carry, nor provide, insurance coverage for accidental injuries; medical conditions caused by pre-existing conditions, or accidents involved in preparing for or participating in Fair activities; for property damage coverage owned or utilized by fair participants; or liability coverage arising out of the use of the participant's own property. Participants should consult with their own insurance agent or legal counsel to procure their own coverage.

The Branch County Fair requires execution of the following Waiver and Release. Your cooperation is greatly appreciated.

WAIVER AND RELEASE OF ALL CLAIMS

Please read this form carefully and be aware that in registering yourself and/or your ward to participate in this/these program(s), you will be waiving and releasing all claims of injuries, damages or loss, or claims your ward might sustain through participation in this/these program(s) listed below.

(Youth Fair Activities)

As a participant or the parent/guardian of a participant in this program, I recognize and acknowledge that there are certain risks of physical injury up to and including death, and I agree to assume the full risk of any injuries, damages or loss which I or my ward may sustain as a result of participating I any way associated with the activities of the program.

As a participant or the parent/guarding of a participant in this program, I will abide by all rules and regulations set forth by the Branch County Fair regarding the youth program.

I further agree to indemnify, hold harmless, and defend the Branch County Fair, the Branch County Fair Board — or any entity needed, and the respective officials, agents, servants, representatives, volunteers, employees and board members from any and all claims for injuries, damages or loss sustained by me or my ward arising out of, connected with, or in any way associated with the activities of the program.

In the event of any emergency, I authorize program officials to secure from any licensed hospital, physician and/or medical personnel any treatment deemed necessary of me or my ward's immediate care and agree that I will be responsible of repayment of any and all medical services rendered.

I HAVE READ AND FULLY UNDERSTOOD THE ABOVE PROGRAM DETAILS. I AGREE TO WAIVER AND RELEASE ALL CLAIMS AND GIVE PERMISSION TO SECURE TREATMENT AS NECESSARY.

| Exhibitor or Volunteer Signature: | |
|-----------------------------------|--|
| Parent/Legal Guardian Signature: | |