Bluejacket Anglers Release, Waiver of Liability, and Publicity Consent

1. Assumption of Risk

I understand that the risk of injury, disability, death, loss, or damage to my person or property from the activities involved in this Program is significant, including the potential for permanent paralysis and death. While particular rules, equipment, and personal discipline may reduce these risks, the risk of serious injury does exist.

2. Opportunity for Counsel

I have been advised by the Bluejacket Anglers that I may seek legal counsel with respect to the legal effect of this document, and I have had the opportunity to do so.

3. Release and Waiver of Liability

I KNOWINGLY AND FREELY ASSUME ALL RISKS REFERRED TO ABOVE, BOTH KNOWN AND UNKNOWN, EVEN IF ARISING FROM THE NEGLIGENCE OF THE BLUEJACKET ANGLERS, THE STUDENT ANGLER ORGANIZATION, THEIR OFFICERS, OFFICIALS, DIRECTORS, VOLUNTEERS, SHAREHOLDERS, AGENTS, AND/OR EMPLOYEES, OTHER PARTICIPANTS, SPONSORS, ADVERTISERS, AND, IF APPLICABLE, OWNERS AND LESSORS OF PREMISES AND PROPERTY USED TO CONDUCT THE EVENT (COLLECTIVELY, "RELEASEES"). I ASSUME FULL RESPONSIBILITY FOR MY PARTICIPATION AND ALL RISKS ARISING THEREFROM.

I, FOR MYSELF AND ON BEHALF OF MY HEIRS, ASSIGNS, PERSONAL REPRESENTATIVES, AND NEXT OF KIN, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS THE RELEASEES FROM ANY AND ALL CLAIMS, DEMANDS, LOSSES, AND LIABILITY ARISING OUT OF OR RELATED TO ANY INJURY, DISABILITY, DEATH, OR LOSS OR DAMAGE TO PERSON OR PROPERTY I MAY SUFFER, OR WHICH I MAY CAUSE, WHETHER ARISING FROM NEGLIGENCE OF THE RELEASEES OR OTHERWISE, TO THE FULLEST EXTENT PERMITTED BY LAW.

4. Compliance with Rules

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

5. Medical Authorization & Insurance

In the event of injury or illness, I hereby authorize representatives of the Bluejacket Anglers to obtain medical treatment for me (or my minor child/ward) as deemed necessary. I understand and agree that:
- I am solely responsible for any medical or other costs incurred as a result of such treatment;
- The Bluejacket Anglers do not provide medical, accident, or health insurance for participants; and
- I am responsible for carrying my own medical insurance coverage.

6. Property Responsibility

I acknowledge that I am solely responsible for my personal property. The Bluejacket Anglers and Releasees are not responsible for loss, theft, or damage to personal belongings brought to any event or activity.

7. Publicity Consent

In consideration for permission to participate, I hereby grant to the Bluejacket Anglers and their assignees, licensees, and sponsors (including television production companies contracted by the Bluejacket Anglers) the unconditional, perpetual, worldwide right to use my name, voice, photographic likeness, biographical

information, fishing tips and/or instructions in any medium whatsoever, including but not limited to video/audio productions, merchandising, promotions, articles, and/or press releases, without restriction as to changes or alterations from time to time. I understand that I will not be entitled to receive royalties or other compensation in connection with such use. If I win any event, my name, likeness, and biographical information may be used in connection with advertising and promotion without additional consent or compensation.

8. Governing Law / Venue

This Agreement shall be governed by and construed under the laws of the State of [Insert State], and any legal action arising out of this Agreement shall be brought exclusively in the courts located in [Insert County/State].

9. Severability

If any provision of this Release is held invalid or unenforceable, the remainder of the provisions shall remain in full force and effect.

Acknowledgment by Minor Participant

I acknowledge that I have read and understand the rules for participation in the Bluejacket Anglers events and agree to follow then at all times.

Participant's Signature: _____

Printed Name: _____

Date: _____

Email: _____

Phone: _____

Age: _____

For Parents/Guardians Consent, Release and Signature

I, the undersigned parent/guardian, certify that I have legal responsibility for the minor participant named above. I have read and fully understand the Release of Liability, Assumption of Risk, Medical Authorization, and Publicity Consent provisions of this document. I consent to my child's participation in the Bluejacket Anglers events and programs, and I hereby release, indemnify, and hold harmless the Releasees from any and all liabilities incident to my child's participation, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

Parent/Guardian's Signature: _____

Printed Name: _____

Date: _____