



# PARTICIPANT WAIVER MODEL RELEASE SIGN BELOW

1. The risk of injury from the activities involved in these programs is significant, including the potential for permanent disability and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury to me does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, and I assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If I observe any unusual significant concern in my readiness for participation and/or in the program itself, I will remove myself from participation and bring such to the attention of the nearest official; and,
4. I, for myself and on behalf of my/ours heirs, assigns, personal representatives and next of kin, HEREBY RELEASE the Bayou-River District Senior Games, its officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertiser, and if applicable, owners and lessors of the premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my involvement or participation in these programs WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
5. I for myself and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releasees from any and all liabilities incidental to my involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.

I, the undersigned participant, grant to the Bayou-River District Senior Games the right to use any pictures taken of me during the Bayou-River Senior Games without remuneration and in any medium the photographer/staff sees fit for art, advertisement, exhibition, editorial, or any purpose whatsoever.

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARY WITHOUT ANY INDUCEMENT.**

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

Email address \_\_\_\_\_

**EMERGENCY CONTACT** Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

**ALL FEES WILL BE PAID BY**  
**St. Charles Council on Aging or Parks & Recreation Department**

**ENTRY FEE.....\$20.00**

**BANQUET.....\$10.00**

**Bowling.....\$12.00**

I have checked the event entries on this form and verify that they are correct. I have also signed the liability waiver.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_