

PARTICIPANT WAIVER

The undersigned voluntarily agrees to participate in the **6th ANNUAL CHILI COOK-OFF** program sponsored by **ORANGE PARK ACRES WOMEN'S LEAGUE (OPAWL)** on **MARCH 18, 2018**.

The undersigned recognizes **OPAWL** has not undertaken any duty or responsibility for his or her safety and the undersigned agrees to assume the full responsibility for all risk of bodily injury, death, disability, and property damage as a result of participating in the **6TH ANNUAL CHILI COOK-OFF**.

By my signature, I hereby state that I understand the risks involved in participating in the **6TH ANNUAL CHILI COOK-OFF** and willingly and voluntarily accept these risks. By my signature, I hereby surrender any right to seek reimbursement from **OPAWL** and its directors, officers, employees, volunteers and other agents for injury sustained and liability incurred during my participation in the activity described above. By my signature, I warrant that I am not relying on any oral representations, statements or inducement apart from the statements made on this form.

By signing below, the parties confirm that they have read, understand, and consent to the terms of this waiver agreement.

Signature

Printed Name

Date

OPAWL Representative Signature

Printed Name

Date