

HEART OF THE OZARKS FAIR
Minor's Assumption of Risk Acknowledgement

HEART OF THE OZARK FAIR
Description and Location of Event(s)

I have obtained my parent's consent to participate in the above event(s). I understand that I am assuming all of the risks if I get hurt during the event(s), and I state the following:

1. Both my parents and I believe I am qualified to participate in the event(s). I will inspect the premises and equipment and if, at any time, I feel anything to be unsafe, I will immediately leave and refuse to participate further in the event(s).
2. I understand that the **ACTIVITIES OF THE EVENT ARE VERY DANGEROUS and INVOLVE RISKS AND DANGERS OF MY BEING SERIOUSLY INJURED OR HURT, MY BEING PARALYZED OR KILLED.**
3. I know that these risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the event(s).

I HAVE READ THE ABOVE ASSUMPTION OF RISK ACKNOWLEDGEMENT, UNDERSTAND WHAT I HAVE READ AND SIGN IT VOLUNTARILY.

I HAVE READ THIS RELEASE:

_____ Signature of Minor Participant	_____ Date
_____ Printed name of Minor Participant	_____ Age

I HAVE READ THIS RELEASE:

_____ Parent / Guardian Signature
_____ Printed name of Parent / Guardian