

Winter Art Techlympics 2018
Waiver of Liability, Assumption of Risk, and Emergency Contact

Date:	
Participant's Name:	
Team Name:	
Phone:	
Address:	
Email address:	

In consideration of being allowed to participate in any way in the above listed related events and activities,

I (add name) _____ the undersigned, acknowledge, appreciate and agree that:

1. The risk of injury from the activities involved in these sport events is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and
2. I knowingly and freely assume all such risks, both known and unknown, and assume full responsibility for my participation; and
3. I willingly agree to comply with the stated instructions and policies and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release, indemnify and hold ArtTechSpace or Winter Art Techlympics 2018, and their officers, officials, volunteers and/or employees, other event participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event or activity ("Releases") harmless with respect to any and all injury, disability, death, or loss or damage to person or property, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Signature _____ **Date** _____

I understand, agree and acknowledge that some activities may be of a hazardous nature and/or include physical and/or strenuous activity. Understanding this, I state that I have no medical condition or impairment that might inhibit my safe and active participation in the above listed activity. In addition, I understand that ArtTechSpace and Winter Art Techlympics 2018 do not provide medical insurance coverage for activity participants and that participants are responsible for their medical care. In the case of injury or medical emergency and in the event participant, or their parent or guardian, cannot respond at the time of the emergency, ArtTechSpace and Winter Art Techlympics 2018 has permission to seek, administer, or have administered whatever first aid or emergency medical care deemed necessary for participant's welfare, and it is understood that participant, and not ArtTechSpace or Winter Art Techlympics 2018, shall be responsible for any and all charges for such health care services regardless of whether the participant's can cover such charges and should organise their own health care coverage.

S i g n a t u r e _____ **D a t e** _____

Emergency Contact Information:

Contact's Name	
Relation	
Phone	