

**2017 Emerald Coast MudRun For Orphans  
Accident Waiver and Release of Liability**

I acknowledge that this athletic event is an extreme test of a person's physical and mental limits and carries with it the potential for serious injury, death and/or property loss. I acknowledge this is a recreational activity and I am participating of my own free will. These risks include, but are not limited to, terrain, facilities, temperature, weather, condition of athletes, lack of hydration, equipment, traffic, actions of other people, including but not limited to, participants, volunteers, spectators, coaches, event officials, and event monitors, and/or producers of the event.

I hereby assume all risks of participating in this event.

I will not enter and participate unless I am medically able. By my signature, I certify that I am medically able to perform this event, and am in good health, and have not been advised otherwise by a qualified medical person.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this event. I understand my right to refuse medical care and advice of medical providers; if my medical condition becomes such that my mental capacity is questioned, I hereby provide medical providers the right to recommend and initiate treatment. I understand and agree that I assume liability for any and all medical expenses incurred as a result of participating in the event, including but not limited to ambulance transport, hospital stays, physician and pharmaceutical goods and services

I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I acknowledge that I have sole responsibility for my personal possessions and athletic equipment during the Emerald Coast MudRun and its related activities.

I attest that I have read the requirements of the race and agree to abide by them and I hereby assume all risks of participating and/or volunteering in this event. I grant permission to use my photographs, motion pictures, recordings or any other record of this event for any legitimate purpose.

I acknowledge that this Accident Waiver and Release of Liability form will be used by the event holders, sponsors and organizers, in which I may participate and that it will govern my actions and responsibilities at said event. Having read this waiver and knowing these facts and inconsideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release Heart of the Bride Ministries, Inc. and their representatives, Northwest Florida State College and their representatives, and all event sponsors and their representatives from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver.

The Accident Waiver and Release of Liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law. I hereby certify that I have read this document and understand its content and warrant that all statements herein are true and correct. I understand that all Releases have relied upon these statements in allowing me to participate in the event. I understand and agree that if I, or any of the Releasors, initiates any suit or action at law against any of the Released Parties for any loss or injury, no matter how minor or severe, to my person or property, that this Agreement will be used in court. I also understand that agreements such as this have been upheld in court before in connection with injuries, loss and death arising out of participation in activities similar to the event.

**COVENANT NOT TO SUE**

I agree never to pursue any claim or institute any lawsuit or action at law or otherwise against any of the Released Parties, nor initiate or assist in the prosecution of any claim or cause of action for damages or injury, that I or the Releasors may have either now or at any time in the future, by reason of any loss or injury (including death) to my person or property relating to or arising out of the activities contemplated by or in this Agreement and my participation in the event.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

**MINORS: IF UNDER 18, SIGNATURE OF PARENT OR GUARDIAN IS REQUIRED**

The undersigned parent or guardian of the child/ren named below, does hereby represent that he/she (they) is (are), in fact, acting in such capacity, has fully read and understands the terms of this Agreement and the risks assumed in allowing a child to participate in the Event, consents to and grants permission for the child's participation in the Event, and agrees to indemnify, save and hold harmless each and all of the parties herein referred to above as Released Parties from all loss, liability, damage, cost or claim whatsoever arising out of, related to, or resulting from the child's participation in the Event.

\_\_\_\_\_  
Child or Children's Names (Print)

\_\_\_\_\_  
Parent/ Guardian Signature

\_\_\_\_\_  
Printed Name of Parent/Guardian

\_\_\_\_\_  
Date