



## Off The Grid Racing, LLC - ACCIDENT WAIVER AND RELEASE OF LIABILITY

I, \_\_\_\_\_ (print name) acknowledge that this athletic event is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury and property loss. The risks include, but are not limited to: actions of other people including, but not limited to, participants, volunteers, spectators, coaches, event officials, event monitors and/or producers of the event; condition of athletes, equipment, vehicular traffic, lack of hydration, facilities, weather, and/or other natural conditions. I hereby assume all of the risks of participating in this event.

\_\_\_\_\_ (initials) I certify that I do not have any physical limitations, medical ailments, or physical or mental disabilities that would limit or prevent me from participating in this athletic event. If required, I will obtain a medical examination and clearance.

\_\_\_\_\_ (initials) I hereby consent to receive medical treatment that may be deemed advisable in the event of injury, accident, and/or illness during this event.

\_\_\_\_\_ (initials) I understand that at this event or related activities I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers, and/or assigns.

In consideration of my application and permitting me to participate in this event, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) Waive, release, and discharge from any and all liability for my death, disability personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me or my traveling to and from this event, THE FOLLOWING ENTITIES OR PERSONS: Off The Grid Racing, LLC, and their directors, officers, employees, volunteers, representatives and agents, the event sponsors and event volunteers, (B) indemnify and hold harmless all entities or persons mentioned in this paragraph from any and all liabilities or claims made by other individuals or entities as a result of my actions during this event.

This AWRL shall be construed broadly to provide a release and waiver to the maximum extent permissible and will be governed by and construed in accordance with the laws of the State of Florida.

I hereby certify that I have read this document and I understand its content.

Team Name: \_\_\_\_\_

Event Name: \_\_\_\_\_

Your Name: \_\_\_\_\_ Age: \_\_\_\_\_

Sign: \_\_\_\_\_ Date: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_

### PARENT OR GUARDIAN WAIVER FOR MINORS (Under 18 years old)

The undersigned parent or legal guardian does hereby represent that he/she is, in fact, acting in such capacity and agrees to save and hold harmless and indemnify each and all of the parties referred to above from all liability, loss, cost, claim or damage whatsoever which may be imposed upon said parties because of any defect in or lack of such capacity to so act and release said parties on behalf of the minor and the parents or legal guardian.

Minor's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Sign: \_\_\_\_\_ Date: \_\_\_\_\_