## Lower Shore CASA: CANOE JOUSTING

June 14, 2025

## **RELEASE OF LIABILITY WAIVER**

In consideration of being allowed to participate in any way in this sports activity, related events and activities, the undersigned acknowledges, appreciates, and agrees that: The risk of injury or illness from participating in activities involved in this sport 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 or illness does exist; and, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEE'S or others and assume full responsibility for my participation; and, I willingly agree to comply with the stated and customary terms and conditions for participation.

If I observe any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such hazard to the attention of the nearest official immediately; and, I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS LOWER SHORE CASA; LIFE CRISIS CENTER; CITY OF SNOW HILL; SNOW HILLVOLUNTEER FIRE COMPANY; their officers & directors, officials, agents, and/or employees, other participants, sponsoring agencies, commissions, sponsors, advertisers, volunteers, and, if applicable, owners and lessors of premises used to conduct the event ("RELEASEE'S"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEE'S OR OTHERWISE.

I also acknowledge that photographs and video may be taken of me in my participation in, and attendance at this event, and hereby freely agree to allow without restriction all uses of such photos and videos in the reporting of these activities, and/or in the promotion of this event, its location, other sporting events, sport in general, and/or related purposes.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

## PLEASE COMPLETE ALL SECTIONS

(Participant Name: PLEASE PRINT)		
Address:		
Phone:		
Email Address:		
Emergency Contact Name:	Phone	
Signature:	Date:	
I, as parent/legal guardian with legal responsible above, of all the Releasee's, and, for myse harmless the Releasee's from any and all l programs as provided above, EVEN IF All extent permitted by law. I further agree to	onsibility for this participant, or elf, my heirs, assigns, and next liabilities incidental to my min RISING FROM THE NEGLIG the photographic and video re	TIME OF REGISTRATION) This is to certify that do consent and agree to his/her release as provided of kin, I release and agree to indemnify and hold nor child's involvement or participation in the GENCE OF THE RELEASEE'S, to the fullest elease set forth above. Minor DOB:
Address:		
Emergency Contact #		
Signature of Parent/Legal Guardian:		Date: