

# FALLEN OFFICERS MEMORIAL RUN WAIVER

- Please print, sign and date this waiver
- Both Driver & Passenger (if applicable) must sign
- Bring it with you along with your registration fee on the morning of the Run

I represent that I understand the nature of the event and that I am qualified, in good health and in proper physical condition to participate in such event. I further acknowledge that the activity will be conducted over public roads and facilities open to the public during the activity.

I fully understand the event involves risk of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the "Releasee(s)" named below: and that there may be other risks either not known to me or not readily foreseen at this time: and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I incur as a result of my participation in the event. I hereby release, discharge and covenant not to sue the **Fallen Officers Memorial Run**, their respective administrators, directors, agents, officers, volunteers and employees, other participants, any sponsors, advertisers and if applicable, owners and lessors of premises on which the activity takes place (each considered one of the "Releasers" herein) from all liability, claims, demands, losses or damages on my account caused or alleged to be caused in whole or in part by the negligence of the above mentioned or otherwise, including negligent rescue operations: and I further agree that if, despite this release waiver of liability, and assumption of risk I or anyone on my behalf, makes a claim against any of the "Releasers" I will indemnify, save and hold harmless each of the "Releasers" from any loss, liability, damage or cost which may incur as the result of such claim. I have read this release and waiver of liability, assumption of risk and indemnity and full understand it.

I also hereby consent to permit emergency treatment in the event of illness or injury. I also grant you permission to use my name, picture, voice and words in television, radio, films, newspaper, magazines, and other media and in any other form not heretofore described for the purpose of advertising, fundraising and fund raising activities to support the **Fallen Officers Memorial Run**.

**I have read the waiver and I understand its contents.**

**Yes, I understand (Driver)**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Yes, I understand (Passenger)**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date