

Adult Liability Waiver and Photo Release Form

United Way of Greater Plymouth County (UWGPC)
934 West Chestnut Street
Brockton, MA 02301



I, the undersigned, for myself and my heirs, assigns and personal representatives, do hereby agree to the following:

- I acknowledge that volunteer and participant activities may include hazardous conditions, and that I should not participate in such activities unless I believe I am medically and physically able to do so.
- I knowingly and freely assume all risks, both known and unknown, associated with my voluntary participation in this and related events
- I hereby agree to indemnify and hold harmless the Sponsors and United Way against and from any liability for injury or damage I may cause to others or to the property of others during the course of my participation in the Event.
- I hereby release, waive and discharge any and all claims, liabilities, debts and causes of action, foreseen or unforeseen, death, personal injury, property damage, or other injury, arising out of my participation in this activity. This includes but is not limited to transportation to and from, and my participation in, the event and related activities.
- I hereby agree not to sue the Sponsors, and their respective parents, subsidiaries, affiliates, directors, officers, employees, agents, partners, administrators, volunteers, insurers, successors
- If, during the course of the event, I observe unusual or unnecessary hazards, I will bring attention of the event or hazard to the nearest event worker as soon as practicable.
- No statements regarding the effect of this Agreement, not contained in the Agreement, shall modify the terms of the Agreement.

I also consent to the following:

- UWGPC, through this release, may use any and all photographs, likenesses, video reproductions, motion pictures, or other record taken on this day, without limitation to pictures and sound of myself alone or with others, for any reasonable purpose, with no compensation to me. These photographs or other reproductions may be shared with partners, including media, or other partners with no limitation.

I agree to the following statements:

I certify that I am 18 years of age or older. (If under 18, ask for a waiver for under 18).

- I have read this liability waiver and photo release form which is provided to ALL participants prior to participation, fully understand its terms, and understand that I have given up substantial rights by signing it. I sign it freely and voluntarily without inducement.

Signature _____ Date _____

Print Name _____ Phone _____

Email _____

Organization Name (if applicable) _____

EMERGENCY CONTACT INFORMATION

Name _____ Relationship _____

Mobile Phone _____