

LIGHTS AND SIRENS GLOW 5K FUN RUN

Saturday, August 3, 2019 – 9:00 PM

In order to participate you must bring this document filled out entirely on the day of the event.

PLEASE READ CAREFULLY BEFORE SIGNING

LIABILITY RELEASE, INDEMNITY AND PROMISE NOT TO SUE: I, the undersigned below, in consideration of participation in the above referenced event, and any related activities (“Event”), wherever the/these Event(s) may occur, acknowledge that participation in the Event may result in risks, which among other things, include but are not limited to scrapes, bruises, twisted ankles and various injuries to the body, including death and heat and stress related issues, and I freely assume any and all risks incidental to, arising from, or caused by such participation. In consideration of participation in the Event, and on behalf of any heirs, devisees, and executors, I hereby forever release, covenant not to sue, and forever discharge the Released Parties (as defined below) of and from all liabilities, claims, actions, damages, costs and expenses of any nature whatsoever arising out of, related to, or in any way connected with participation in the Event, and further agree to indemnify and hold each of the Released Parties harmless from and against any and all such liabilities, claims, actions, damages, costs and expenses including, but not limited to, all attorneys’ fees, costs of court, and all other necessary fees and disbursements including any appeals. I understand that this Release and indemnity includes any claims based on the negligence, action or inaction of any of the Released Parties and covers bodily injury (including, without limitation, death), property damage, and loss by theft or otherwise, whether suffered before, during or after such participation. For the purposes hereof, the “Released Parties” are: Lakeville Public Safety Foundation, its directors, officers, employees, agents, and Event sponsors together with their parent and the parent, subsidiary, affiliated and related entities of each of them, and the trustees, officers, directors, employees, and volunteers of any of them.

AUTHORIZATION AND RELEASE TO USE LIKENESS: I further grant the Released Parties the right to photograph and/or videotape me and/or my child or ward and further to display, use and/or otherwise exploit my and/or my child’s or ward’s name, face, likeness, voice, and appearance forever and throughout the world, in all media, whether now known or hereafter devised (including, without limitation, in online web casts, television, motion pictures, films, newspapers, and magazines) and in all forms whether for advertising, publicity, or promotional purposes, without compensation, reservation or limitation.

This Waiver, Release, Promise Not to Sue, Authorization and Release to Use Likeness Form shall be governed by the laws of the State of Minnesota. If any provision of this Form shall be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Form and shall not affect the validity and enforceability of any remaining provisions. I certify I am eighteen (18) years of age or older and, if I am executing this Waiver and Permission Form on behalf of my child or ward, the information set forth below pertaining to my child or ward is true and complete.

I HAVE READ, UNDERSTOOD AND ACCEPT THE CONDITIONS OF THIS (i) LIABILITY RELEASE, INDEMNITY, AND PROMISE NOT TO SUE, AND (ii) AUTHORIZATION AND RELEASE TO USE LIKENESS.

Participant Name _____

Parent or Court Appointed Guardian Name (If Participant is under 18 years of age) _____

Signature _____ Date _____

Date of Birth _____ Emergency Contact Number _____

Street Address _____ City _____

State _____ Zip Code _____ E-mail _____