

**AMERICAN CANCER SOCIETY  
2015 RUTLAND COUNTY RELAY 5K RUN/WALK**



**SATURDAY, OCTOBER 10<sup>TH</sup> 2015**

**LIABILITY WAIVER**

I have elected to participate in the 2015 Rutland County Relay 5K Run/Walk on Saturday, October 10<sup>th</sup> 2015.

I understand that my participation in the 5K Run/Walk is voluntary. I realize that any time one engages in physical activity such as a 5K Run/Walk, there are inherent risks and dangers including, but not limited to, muscular or skeletal problems, heart attack, cerebral problems and other miscellaneous injuries or conditions and possibly death.

I, therefore, accept all responsibility and voluntarily assume all risks and dangers of any injury or damage to my person, which may arise from my participation in the 5K Run/Walk, whether occurring prior to, during or after the event.

With acceptance of this entry, I hereby release and discharge the American Cancer Society, the Relay For Life of Rutland County, its officers, employees, sponsors, organizers, volunteers, other representatives or their successors, and all other persons connected therewith, from all causes of action, claims, demands, damages and liability whatsoever that I or my representatives have or may have against any of them, arising from my participation in this 5K Run/Walk.

I also grant permission to the American Cancer Society to use my image or likeness in connection with any live or recorded transmission or reproductions, whether by photo, film, videotape or otherwise, of the event for any purpose.

I have carefully read this Release, understand and agree with all of its terms and conditions.

Signature:

\_\_\_\_\_

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

Printed:

\_\_\_\_\_

**\*\*\*\*\*IF UNDER 18, SIGNATURE MUST BE FROM PARENT/GUARDIAN\*\*\*\*\***

Minor's Name:

\_\_\_\_\_

Parent/Guardian's Signature:

\_\_\_\_\_

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

Printed:

\_\_\_\_\_