Accident Waiver and Release of Liability

I acknowledge that Racin' for the Seed may be an extreme test of my physical and mental limits and carries with it the potential for death, serious injury and property loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of athletes, equipment, vehicular traffic, actions of other people including, but not limited to, participants, volunteers, spectators, coaches, event officials and event monitors, and/or producers of the event and lack of hydration. These risks are not only inherent to athletes but are also present for volunteers.

I hereby assume all of the risks of participating and/or volunteering in this event. I realize that liability may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained or controlled by them or because of their possible liability without fault.

I certify that I am physically fit, have sufficiently trained to be a participant in the event and have not been advised otherwise by any qualified medical person.

I acknowledge that this Accident Waiver and Release of Liability form will be used by the sponsors and organizers of Racin' for the Seed and that it will govern my actions and responsibilities at said event.

In consideration of my application and permitting me to participate in this event, I for myself, my executors, administrators, heirs, next of kin, successors, and assigns: (A) waive, release and discharge The Mustard Seed, its owners, directors, officers, employees, volunteers, agents, event holders, event promoters, event sponsors, event volunteers, event permit grantors, event property owners and event participants, from any and all liability for my death, disability, personal injury, property damage, property theft, lost income or any otherwise losses, costs or actions of any kind which hereafter may accrue to me by virtue of my training for this event, my participation in this event or my travel to or from this event; (B) indemnify and hold harmless the entities and persons mentioned in this paragraph from any and all liabilities or claims made by other individuals or entities as a result of any of my actions during this event.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident and or illness during this event.

I understand that at this event or related activities, I may be photographed and agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and/or their assigns.

Name (please print)		
Signature	Date	