RULE 62 FOUNDATION
EVENT PARTICIPATION AGREEMENT
WAIVER AND RELEASE
COASTAL COOKOUT – JULY 20, 2024

I understand that participating in this event carries inherent risk, and that my participation may lead to physical injury, illness, or death, or property damage or loss. Understanding the potential risks inherent to my participation, **I assume sole and full responsibility for my personal safety and for any loss or damage to my property during participation in the event.**

In consideration for being allowed to participate in the event, I agree as follows:

1. I will comply with all instructions and directions of Rule 62 Foundation officers, members, and volunteers in connection with participation in the event.
2. I understand the possible risks and dangers to me and my life and property associated with my participation in the event, and I participate voluntarily, in reliance upon my own judgement and ability. **I assume all risk of personal injury, death, and property damage or loss from any cause whatsoever**, including, but not limited to, my own conduct, the failure of anyone to enforce rules and regulations or inspect equipment or facilities, and the negligence of anyone else; and
3. I release and indemnify, defend, and hold harmless Rule 62 Foundation and its officers, members, and volunteers from all liabilities, losses, costs, damages, claims, or causes of action of any kind or nature, whatsoever, sustained by me as a result of or in connection with my participation in the event.

I certify that I am at least eighteen (18) years of age, medically and mentally sound and physically fit to participate in the event and related activities, and am competent to enter into this waiver and release agreement.

If the participant is under eighteen (18) years of age, this document must be signed on behalf of the participant by his or her parents or guardian.

I HAVE READ AND UNDERSTAND THIS PARTICIPATION AGREEMENT; I UNDERSTAND AND AGREE THAT IT SHALL LEGALLY BIND ME AND MY ESTATE, AND I SIGN IT VOLUNTARILY.

_____   _____
Signature   Date

_____   _____
Printed Name   If parent/guardian – specify relationship