Release of Liability- Hidden River Chase Regatta

Printed Name of Participant:

State:

Zip:

Address

Phone:

Signature (only if participant is under the age of 18):

In Consideration of being given the opportunity to participate in the Hidden River Chase on Nov. 3, 2024 , I, for myself, my personal representatives, assigns, heirs, and next of kin. 1. I ACKNOWLEDGE, agree and represent that I understand the nature of Rowing Activities, both on water and land based, and that I am qualified, in good health, and in proper physical condition to participate in such Activity.

2. I FULLY UNDERSTAND that: (a.) ROWING ACTIVITIES INVOLVE RISKS AND DANGERS of serious bodily injury, including permanent disability, paralysis and death ("Risks"); (b.) these Risks and dangers may be caused by my own actions, or inactions, the actions or in actions of others participating in the Activity, the condition in which the Activity takes place, or the negligence of the Release named below; (c.) there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation in the Activity. 3. I AGREE AND WARRANT that I will examine and inspect each Activity in which I take part and that, if I observe any condition which I consider to be unacceptably hazardous or dangerous, I will notify the proper authority in charge of the Activity and will refuse to take part in the Activity until the condition has been corrected to my satisfaction. 4. I HEREBY RELEASE, discharge, and covenant not to sue the Philadelphia Scholastic Rowing Association, the Regatta, their administrators, directors, agents, officers, volunteers and employees, other participating regatta organizers, any sponsors, advertisers, and if applicable, owners and lessors of premises, on which the Activity takes place, (each considered one of the Releasees herein) from all liability, claims, demands, losses or damages on my account caused or alleged to be caused in whole or in part by the negligence of the Releasee or otherwise, including negligent rescue operations; and I further agree that if, despite this release and waiver of liability, assumption of risk, and indemnity agreement, I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as a result of such claim, to the fullest extent permitted by law. I have read this agreement, fully understand its terms, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.

City:	State: Zip	<u> </u>
Phone:	Date	Participant's Signature: Team:
guardian, understand the minor to be qualified AGREE TO INDEMNIC claims, demands, losses by the negligence of the that if, despite this release above Releasee, I WILL litigation expenses, attoring the minor of the third in the control of	e nature of rowing activiti d to participate in such act FY AND SAVE AND HO s, or damages on the minor e Releasees or otherwise, i use, I, the minor, or anyone L INDEMNIFY, SAVE, A	the age of 18) AND I, the minor's parent and/or legal less and the minor's experience and capabilities and believe tivity. I hereby release, discharge, covenant not to sue, and DLD HARMLESS each of the Releasees from all liability, r's account caused or alleged to be caused in whole or part including negligent rescue operations, and further agree e on the minor's behalf makes a claim against any of the AND HOLD HARMLESS each of the Releasees from any lamage, or cost any may incur as the result of any such ted Name of
Parent/Guardian:		
Address:		City:

Date:

Date of Birth:

Parent/Guardian