PLEASE READ CAREFULLY. YOU ARE GIVING UP LEGAL RIGHTS BY SIGNING THIS DOCUMENT.

Page Lake Powell Balloon Regatta Volunteer Assumption of Risk and Waiver of Liability

In consideration for being granted permission to engage in activities associated with the 202____Page Lake Powell Balloon Regatta and/or other associated event activities ("Activity"), I, the undersigned, hereby agree for myself and for my children, my spouse, executors, administrators, assignees, heirs, next of kin, and legal representatives as follows:

I acknowledge that I am at least 18 years old and that my participation in the Activity is voluntary. I further acknowledge that I am aware of the risks of the Activity and voluntarily assume the risk that I may suffer personal injury, illness, permanent disability, property damages, or death. I understand that these risks may result from the actions, omissions, or negligence of myself and/or others, including, but not limited to, City employees, volunteers, and other participants.

I do hereby voluntarily waive and release and discharge from any liability and do further indemnify, agree to defend and hold harmless the City of Page, its governing officers and directors, trustees, employees, agents, representatives, and volunteers, (collectively "City") for any accident, injury, illness, death, loss, damage to person or property, or other consequences suffered by me arising or resulting directly or indirectly from my participation in the Activity. I further voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to myself and property. I understand and agree that this release includes any claims based on the actions, omissions, or negligence of the City, governing boards, members, past members, officers, employees, agents, volunteers, assigns, and representatives. Furthermore, I promise and agree not to make any claim or commence any lawsuit against the City for injuries or damages arising from my participation in the Activity.

I give the City permission to treat me in case of illness, injury, emergency or accident. Should emergency medical services become necessary for me, the expenses are my sole responsibility and not that of the City.

I hereby grant City permission to use my likeness in a photograph in any and all of its publications, including website entries, without payment or any other consideration. I hereby irrevocably authorize the City to edit, alter, copy, exhibit, publish or distribute this photo for purposes of publicizing the Balloon Regatta or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph.

I understand and expressly agree that this waiver and release of all claims is intended to be as broad and inclusive as permitted by the laws of Arizona. If any portion of this agreement is held invalid, I agree that the remainder shall continue in full force and effect. Should either party institute legal suit or action, it is agreed that the venue of such suit or action shall be in Coconino County, Arizona.

I HAVE CAREFULLY READ AND FULLY UNDERSTAND ALL PROVISIONS OF THIS RELEASE, AND FREELY AND KNOWINGLY ASSUME THE RISK AND WAIVE MY RIGHTS AS DESCRIBED ABOVE.

Participant Name:		
Signature:	Date:	