

# SNOFEST

## Cardboard Derby Race

*Copper Mtn Resort, 20 January 2018*

Installation: \_\_\_\_\_ Team/Craft Name: \_\_\_\_\_

Category: FAMILY. YOUTH (all pre-teens) MILITARY ORG. OPEN CLASS. Race #: \_\_\_\_\_

Brief Description of Craft (I.E Sail Boat, Dragon, "Just a Box"): \_\_\_\_\_

### Hold Harmless Agreement

With my signature above, I acknowledge that participation in SnoFest Cardboard Derby at Copper Mountain Resort involves the possibility of physical injury or damage to personal property. I hereby voluntarily assume the risks of participating in any contests in conjunction with the program. In consideration of my participation on the SnoFest Cardboard Derby, I hereby state the following:

1. I waive, release, and discharge the United State Air Force, the Front Range Military Communities, an any of it officers, employees, representatives, or agents from any and all claims, losses, or liabilities for death, personal injuries, partial or permanent disabilities, property damage, medical or hospital bill, theft, or damage of any kind including economic losses, which may arise by reason of participation in the SnoFest Cardboard Derby. To the extent possible by law, I hereby fully waive, release and discharge all parties notwithstanding their own negligent acts or omissions or the negligent acts or omissions of others.
2. I am aware helmets (DOT/Snell approved motor, snow sports or hockey) are mandatory. **Racers will not be allowed to participate without one.**
3. I agree that I will not bring any action or claim against any party's hereby release for any reason associated with SnoFest
4. Indemnify and hold harmless the part's hereby release from any and all claims made or liabilities assessed against them as a result of my participation in the SnoFest Cardboard Derby.
5. Furthermore, I agree to Assume liabilities for any loss, damage injury, death, claims, demands, actions or cause of action, which may be brought by the above participant, or his/her representative as a result of participation in requested activities.
6. I understand that at this event or related activities, I may be photographed and/or videotaped. I 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 assigns.

Name:

Signature of Participant (or guardian if under 18)

Date:

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|-----|-------|-------|-------|
| 1). | _____ | _____ | _____ |
| 2). | _____ | _____ | _____ |
| 3). | _____ | _____ | _____ |
| 4). | _____ | _____ | _____ |
| 5). | _____ | _____ | _____ |

POC Print \_\_\_\_\_ PH# we may contact you at: (\_\_\_\_\_) \_\_\_\_\_ -- \_\_\_\_\_