Mason Triathlon 2018

PARTICIPANT LIABILITY RELEASE/ CONSENT AND INFORMATION RELEASE:

I, _____, intending to be legally bound, understand and agree that I am voluntarily participating in the Mason Triathlon program and all of its activities including, but not limited to, training for and participating in the triathlon event on June 8th & 9th 2018 at my own request and at my own risk. I acknowledge that I am aware of the risks inherent in training for and participating in this triathlon. Furthermore, I certify that I am physically fit, have not been otherwise informed by any physician and know of no restrictions imposed on me by any physician that would in any way prevent me from actively participating in the event.

In consideration of the Mason Triathlon sponsorship of this Event and my being permitted to participate in the Event, I_____, on behalf of myself, my successors in interest, heir, assigns, and representatives, hereby full release and hold harmless the Mason Public School, their employees, the volunteers, any medical providers working for or on behalf of the program, together with their insurers, and sponsors, of loss, damage or injury to person (including death) or any loss or inconvenience whatsoever, suffered by me at anytime hereby arising out of my voluntary participation in this event, whether resulting from the Mason Triathlon or otherwise.

I hereby grant permission to Mason Schools to render preventative or first-aid assistance or seek treatment or medical care that it seems reasonably necessary, including hospitalization, for my health and well being.

This Release and Consent will be governed by and subject to the laws and exclusive jurisdiction of the courts of the State of Michigan and the United States of America.

Date:_____ _____

Signature of Participant

*Must also be signed by parent or legal guardian if the participant is under age 18 or still a high school student on the date this Release and Consent is signed.
I understand, hereby certify that I am the parent or legal guardian of the participant, and such on behalf of myself an the Participant, I agree to the terms of this Release, including the Consent, on behalf of the Participant and I hereby, in accordance with the terms of such Release, release and hold harmless the Mason School district along with their employees (as defined above) from all liabilities (as defined above).

Date:_____ _____

Signature of Parent/ Guardian

Date:_____ _____ _____

Witness Witness

Emergency Information

Contact_____ Relationship_____

1st phone_____ 2nd phone_____

Second Contact_____Relationship_____

1st phone_____ 2nd phone_____