Accident Waiver and Release of Liability

The undersigned hereby assumes any and all risks associated in participation in the physical assessment and/or obstacle course, including, by way of example and not limitation, any risks that may arise from any negligence on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained or controlled by them, or because of their possible liability without fault.

The undersigned further acknowledges that this Accident Waiver and Release of Liability will be used by Congressman Brian Mast ("Member"), the organizer of the physical assessment and/or obstacle course in which I may participate and that it will govern my actions and responsibilities at said the physical assessment and/or obstacle course. In consideration of my application and permitting me to participate in this the physical assessment and/or obstacle course, the undersigned hereby takes action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

(A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including, but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me, THE FOLLOWING ENTITIES OR PERSONS: Congressman Brian Mast ("Member"), the U.S. House of Representatives, the employees and/or agents of the U.S. House of Representatives, and the United States.

(B) I HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned paragraph (A) from any and all liabilities or claims made as a result of participation in this physical assessment and/or obstacle course, whether caused by negligence or otherwise. I further acknowledge that this physical assessment and/or obstacle course, like any such physical activity, may carry with it the potential for death, serious injury, and personal loss. The risks may include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of participants, equipment, and the actions of other persons including, but not limited to, other participants, staff, volunteers, and spectators.

(C) I consent and agree that this accident waiver and release of liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law

Authorization:

Printed Name: ________________________________________________________
Signature: ________________________________ Date: ______________________

Street Address: _______________________________________________________

City: ___________________________ State: ________ Zip: __________________

The undersigned hereby attests that he/she is at least 18 years old and, if applicable, further attests that I am the parent or legal guardian of any minor child or minor children listed below and that as the parent or legal guardian I have full legal authority to authorize their participation in the physical assessment and/or obstacle course and agree to all terms in the above Accident Waiver and Release of Liability.

Relationship to Children: ______________________________________________

Names and Ages of Minor Children:

Name: ________________________________ Age: _____

Name: ________________________________ Age: _____