



WAIVER AND RELEASE AGREEMENT

THIS DOCUMENT WILL AFFECT YOUR LEGAL RIGHTS AND LIABILITIES. PLEASE READ IT CAREFULLY BEFORE SIGNING. IF YOU ARE UNDER 18 YEARS OF AGE, YOUR PARENT OR GUARDIAN MUST SIGN THIS WAIVER.

In consideration of FUNKY THREADZ, (the "STORE"), TRAPPERS' FESTIVAL ("NMTF") allowing me to participate in the TRAPPERS' DAMNJAM 2018 program and related activities (the "Events") at sanctioned parks and events, the undersigned agrees as follows:

1. I ACKNOWLEDGE that the risk of injuries involved in the Events is significant, including permanent disability and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury to me does exist;
2. I KNOWINGLY AND FREELY ASSUME AND ACCEPT ALL SUCH RISKS, DANGERS AND HAZARDS, KNOWN AND UNKNOWN, EVEN IF ARISING FROM THE NEGLIGENCE of the STORE, NMTF, their directors, officers, employees, agents, representatives, officials, other participants, sanctioned events, parks and organizations, and any owners and lessors of premises used to conduct the Events (all of whom are collectively referred to as the "RELEASEES") and I assume full responsibility for my participation;
3. I WAIVE ANY AND ALL CLAIMS that I may have against the RELEASEES;
4. I RELEASE the RELEASEES FROM ANY AND ALL LIABILITY FOR ANY LOSS, DAMAGE, INJURY that I or my next of kin may suffer or incur as a result of my participation in the Events WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE to the fullest extent permitted by law;
5. THIS AGREEMENT shall be effective and binding upon my heirs, next of kin, executors, administrators and assigns, and
6. I AGREE to comply with the stated and customary terms and conditions for participation. If I have any concerns about my readiness for participation in the Events or the Events themselves, I will remove myself from participation in them and bring such concerns to the attention of the nearest official immediately.
7. I AGREE to wear a safety helmet (if PARENT requires) and understand that other safety equipment (elbow & knee pads) are suggested by the organizers.

I HAVE READ AND UNDERSTAND THIS WAIVER AND RELEASE AGREEMENT PRIOR TO SIGNING IT AND FULLY UNDERSTAND ITS TERMS AND UNDERSTAND THAT BY SIGNING IT, I AM AFFECTING THE LEGAL RIGHTS OF MYSELF, MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS AND ASSIGNS, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT. I attest that I am physically fit and have been trained for this activity. I also waive and release the use of my photograph and likeness for any reason or any purpose. I WANT TO PARTICIPATE!

Participant,
Parent or Guardian's
Initials



Medical Release: in the event that I cannot be reached in an emergency, I hereby give permission to any licensed physician, surgeon, clinic, or hospital to secure proper treatment, and to order anesthesia for my child/myself as named above. My child/ I am allergic to the following medications:

Doctor to notify in case of emergency: _____

Circle Desired Entry:

SNOWSKATE BEG / SNOWSKATE ADV / SNOWBOARD BEG/ SNOWBOARD ADV

Participant: _____ Date of Birth: _____ / _____ / _____
Address: _____ Apt: _____
City: _____ Province: _____
Phone Number: _____

IF PARTICIPANT IS OVER 18 YEARS OF AGE:

Participant Signature: _____ Date: _____
Witness Signature: _____ Date: _____

IF PARTICIPANT IS UNDER 18 YEARS OF AGE:

Parent or Guardian: _____ (print please) Date: _____
Parent or Guardian Signature: _____ (sign please) Date: _____
Parent or Guardian's Driver's License Number: _____
Witness Signature: _____ Date: _____

**PLEASE BRING THIS ENTRY FORM WITH YOU TO THE CONTEST NO LATER THAN 12:45 PM.
DO NOT EMAIL OR LEAVE IT AT FUNKYTHREADZ.**