

Persons age 17 and under
Acknowledgement, Waiver, and Release from Liability

I acknowledge that participation in this **800 Meter Run/Walk** is potentially hazardous and includes the possibility of death, serious injury, and property loss. I attest or verify that I am, and/or the above-named child is, medically able to safely complete these events. I assume all the risks associated with my participation and/or that of my child in this event, including, but not limited to falls, actions, or contacts with other participants, volunteers, the YMCA of the Mohawk Valley, Ilion Days Committee and spectators. I am aware that the medical support for this event will be personnel who will be prepared to administer first aid assistance. I agree to abide by any decision of a meet volunteer relative to my ability and/or that of my child to safely complete any of these events. I also grant full permission to any and all of the foregoing to use any photographs of this event for any purpose whatsoever. Having read this waiver and knowing these facts, and on conditions of your accepting my participation and/or that of my child, I, myself, and anyone entitled to act on my behalf, waive, release, and discharge the YMCA of the Mohawk Valley, Ilion Days Committee and volunteers, Central Valley School District, and all assigns and sponsors from all claims and liabilities of every kind or nature arising out of my participation and/or that of my child's participation in this event. I hereby certify that I have read all of the terms/conditions of this release and intend to be legally bound thereby.

Participant (please print) _____

D.O.B. _____

Age as of December 31st (this yr.) _____

Town _____

Signature of Parent/Guardian _____

Date _____