

Liability Release

REQUIRED FOR ALL PARTICIPATING IN DEAF POWER ORGANIZATION EVENTS

Participant Name (Print): _____

Contract Releasing Liability:

I know that any sport involved in a practice, event, or race, regardless of the distance or place, is a potentially hazardous activity. I should not enter and participate unless I am medically able and properly trained.

I, the undersigned, hereby assume all risks of personal injury, illness, death, and damage to or loss of property.

I expressly waive and release **Deaf Power Organization (DPO)**, its affiliates, agents, officers, committees, sponsors, volunteer van drivers, volunteers, and subsidiaries from any and all liabilities, claims, demands and causes of action while participating with the DPO in any training, practice, including traveling to or from the events, for personal illness, death, extreme weather or road conditions, physical contacting with other participants, or damage to or loss of property.

Signature of Participant: _____ Date: _____

Signature of Parent/Guardian*
(If Participant is under 18): _____ Date: _____

***Parent/Guardian is REQUIRED to join the team to be with his/her underage participant.**