

Respect and Remember Foundation, Inc.

Tennessee Fallen Heroes Hike

Participant / Volunteer Accident Waiver and Registration and Release of Liability

As a participant, I recognize and acknowledge that there are inherent risks in my presence and participation in the Tennessee Fallen Heroes Hike. I acknowledge that this Accident Waiver and Release of Liability form will be used by the event holders, sponsors, and organizers, in which I may participate, and that it will govern my actions and responsibilities at said events. In consideration of my registration and participation in this event, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors and assigns as follows:

- (A) Waive, Release and Discharge for any and all liability for my death, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me or my traveling to and from this event, their directors, officers, employees, volunteers, representatives and agents, event holders, event sponsors, event directors, organization affiliations, and volunteers;
- (B) Indemnify and hold harmless the entities or persons mentioned in this form from any and all liabilities or claims made by other individuals and entities as a result of any of my actions during this event.

I am aware that The Respect and Remember Foundation, Inc. does not provide health or accident coverage for event participants, and it is my responsibility to pay any medical bills from injuries sustained while participating in this event. I do hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident and/or illness during this event.

I understand that at this event or related activities, I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose.

Print Participant Name

Participate Signature

Date

Legal Guardian Contact Name

Legal Guardian Phone Number

PARENT/GUARDIAN WAIVER FOR MINORS (UNDER 18 YEARS OLD)

The undersigned parent and/or legal guardian do hereby represent that he/she is, in fact, acting in such capacity and agrees to save and hold harmless and indemnify each and all the parties referred to above from all liability, loss, cost, claim or damage whatsoever which may be imposed upon said parties because of any defect in or lack of such capacity to so act and release said parties on behalf of the minor and the parents of legal guardian. I understand that the foregoing Accident and Release of Liability shall apply to my child. I hereby give permission for my child to participate in the Tennessee Fallen Heroes Hike, with the understanding that every reasonable effort will be made to plan for safe participation in this event.

Participant's Name

Parent/Legal Guardian Name

Participant's Age

Signature of Parent or Legal Guardian

Phone Number

Date
