

OFFICIAL WAVIER OF ALL RESPONSIBILITY FORM  
6<sup>th</sup> KLAMATH KINETIC CHALLENGE  
RACE DATE: JUNE 26, 2010

**All team members need to fill out this form  
and mail it in with entry fees ASAP!!**

Name of sculpture \_\_\_\_\_  
Total # of participants \_\_\_\_\_

I want to participate in the 6<sup>th</sup> Klamath Kinetic Challenge in Klamath Falls, Oregon. The event is sponsored by Klamath County, Klamath Arts Council, and a multitude of other wonderful sponsors. For this opportunity to participate, I agree as follows:

1. I agree and understand that Organizers and Sponsors of the race have laid out the course and made suggestions regarding equipment and race sculptures, but they do not in any way guarantee or warrant the safety or condition of the course or any race sculpture.
2. I assume full and complete responsibility for myself, for the course covered by me and/or the sculpture vehicle I will compete with during the race, and for the construction, equipping, maintenance, condition and operation of that sculpture vehicle.
3. I specifically waive against Sponsors and Organizers of the race, any and all complaints and cause of action of any kind, whether from negligence, contract warranty, or whatever the cause. I release and covenant not to sue Organizers and Sponsors from and for all liability for any and all loss and damage arising out of my participation in the race. I further agree to indemnify, defend and hold harmless Organizers and Sponsors from any loss, liability, damage and cost arising from my participation.

Name \_\_\_\_\_ Signature \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_

If I am under 18 years of age, my parent or guardian must sign below in the presence of a notary public.

*NOTE: Do this before the event, there will be no Notary Public to do this at the race Friday night or Saturday morning!*

I have read the above statement and agree to its terms and conditions on behalf of my son/daughter/ward and myself.

Minor's name: \_\_\_\_\_

My relationship to this minor is: \_\_\_\_\_

Signature \_\_\_\_\_

Signed this \_\_\_\_\_ day of \_\_\_\_\_ 2010

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_,

Country \_\_\_\_\_

Notary Public:

State of \_\_\_\_\_

County of \_\_\_\_\_

Personally appeared \_\_\_\_\_ before me on \_\_\_\_\_ 2010 and acknowledged the foregoing to be his/her voluntary act.

\_\_\_\_\_

notary public for \_\_\_\_\_

my commission expires \_\_\_\_\_