

EVERYDAY HEROES 5K WALK – PARTICIPANT’S WAIVER 2010

In consideration of the acceptance of my entry in the Everyday Heroes 5K Walk 2010, I hereby waive, release and discharge any and all rights, claims and actions for damages that I may have or which may hereafter accrue to me against the: San Diego Association of REALTORS® Ambassadors Foundation (Ambassadors) and its officers, directors, employees, volunteers and agents; the San Diego Association of REALTORS® (SDAR) and its officers, directors, employees, volunteers and agents; the City of San Diego and its officers, employees and agents; Mission Bay Park/De Anza Cove, KUSI and any other sponsors or co-sponsors; and any other public agencies, in connection with my participation in the event.

I attest and verify that I am physically fit and able to participate in this event and acknowledge that I am aware of the inherent risks in participating in an athletic event of this type. Nevertheless, I hereby agree to assume those risks and to release and hold harmless all individuals, entities or agencies mentioned above who might otherwise be liable to me (or my heirs and assigns) for any loss or damages. It is understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns.

I hereby consent to receive medical treatment which may be deemed advisable during this event and understand that I am solely responsible for all costs relating to medical transportation and/or evacuation. I grant full permission to Ambassadors and SDAR to use my name, likeness, voice and quotes in legitimate accounts and promotions of this event.

As a participant I certify that all information in this form is true and complete. I have read the entry information provided for the event and certify my compliance with my signature below. San Diego Association of REALTORS® Ambassadors Foundation reserves the right to refuse any entry application. Entry is non-transferable & nonrefundable.

(Please Print)

Name of Participant _____ Date _____

Signature _____
(Parent/guardian signature if participant is under 18 years of age.)

Address _____ City _____ Phone _____