

CanalFEST '19 November 2, 2019 9AM-4PM

PHOTO RELEASE & LIABILITY WAIVER FORM

NOTE: A release is required for each person over age 18. A parent or guardian must sign for dependents under age 18

<u>Voluntary</u> – My participation in this Augusta CanalFEST and its associated activities is voluntary. I will select the activities in which I will participate and choose only those that are within my physical capacities. I will stay away from the water if I cannot swim and/or have any open cuts. I will follow all instructions.

Assumption of Risk - I realize that during this Festival, there are several ways that I could potentially hurt myself if I am not careful or choose an activity that I am not capable of doing. For example, I might choose to (a) kayak, canoe, or paddle board on canal, stream and river banks, (b) canoe in or wade in a canal, streams or rivers that may contain strong currents or uneven bottoms, (c) walk on public roads, (d) pick up sharp items, and (e) activities in or near a canal, stream or river that may contain harmful pollutants, bacteria, or parasites or (f) ride a bike on the towpath or mountain bike trail- helmets are REQUIRED. I realize that my participation in any of these activities is strictly voluntary and that I assume the risks associated with these activities. I could: (a) receive cuts and abrasions, (b) lose personal property such as watches or jewelry, and (c) suffer serious bodily injury.

<u>Waiver</u> - I release the Augusta Canal Authority, sponsors, activity presenters, organizers, volunteers, and site property owners (as well as all of their affiliates, directors, officers, trustees, employees, representatives, or agents) from all actions or claims of any kind that relate to my participation in the Festival. I understand and acknowledge that this waiver binds my heirs, administrators, executors, personal representatives, and assigns.

<u>Hold Harmless</u> - I hold the Augusta Canal Authority, sponsors, organizers, volunteers, and site owners harmless and indemnify them against all actions or claims (including reasonable attorneys' fees, judgments and costs) with respect to any injuries, death, or other damages or losses, resulting from my participation in this Festival.

<u>Medical Treatment</u> - If I am injured during the Festival, the organizers or volunteers of the Festival may render medical services to me or request that others provide such services. By taking such action, the organizers and volunteers are not admitting any liability to provide or to continue to provide any such services and that such action is not a waiver by the organizers or volunteers of any rights under this release and waiver. Should I require transport to a medical facility as a result of an injury, I am financially responsible for such transportation and medical treatment costs. If I am injured during the Festival, it is my responsibility to seek appropriate medical care and to notify the Festival organizers. I understand that this waiver will have no bearing on any workers compensation claims that I may make as a result of my participation in this event.

<u>Pictures</u> - I agree that any pictures or videos taken of me or my children/dependents during the Festival can be used for future promotional purposes by Augusta Canal Authority and any participating Festival sponsors, organizers and activity presenters.

I UNDERSTAND AND AGREE WITH THE CONTENTS OF THIS DOCUMENT. ANY QUESTIONS I MAY HAVE HAD ABOUT THIS DOCUMENT WERE ANSWERED TO MY SATISFACTION.

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PRINT 1 st Participant's name above	2 Participant –same nousenoid	
1 st Participant's SIGNATURE	2 nd Participant's SIGNATURE	
Address		
Traces	- -	
Email	-	Parent/guardian Signature
Emergency Contact Person and Phone#		