

**Fair Haven 3rd Annual
Run for Hospice of the Finger Lakes
July 5, 2008**

Participant/Guardian Agreement, Release and Assumption of Risk:

I, _____ (print name), do hereby covenant and agree to release and hold harmless the Village of Fair Haven, SOFA, Inc. Hospice of the Finger Lakes, all organizers and volunteers against any and all liability, loss, damages, claims or actions (including costs and attorneys' fees) for bodily injury and/or property damage, to the extent permissible by law, arising out of participation in the Fair Haven 3rd Annual Run for Hospice of the Finger Lakes.

*I understand participation in this race involves physical activity and risks of physical injury, and I assume these risks. I further understand that this race is held on local roads and that the condition of the roads and/or weather may pose risk, and that such risks cannot be eliminated.

*I further certify that I am in good physical condition and have no medical, mental or physical conditions that would restrict my participation in this event.

*My participation in this race is voluntary and I agree to assume all risks. I hereby consent to emergency transportation and treatment in the event of illness or injury. I hereby accept responsibility for the payment of any emergency transportation or treatment.

Signature of Participant _____
Address _____
Date _____

Release for Minor:

I, _____ (print name), being the Parent/Legal Guardian of _____ (name of minor – please print), agree to the conditions and release as stated on this form on behalf of the minor child named herein.

Signature of Parent/Legal Guardian _____
Address _____
Date _____ Age of minor _____