# TRIUMPH FOUNDATION INSURANCE WAIVER & RELEASE OF LIABILITY FORM and MEDIA RELEASE FORM

**Please print legibly and fill out information form completely. Note: there are 2 places to sign!**

Name: _____ Date of Birth: _____ Male / Female

Email: _____ Phone #: _____

Mailing Address: _____ City:_____

State: _____ Zip: _____ Emergency Contact Name: _____ Phone #: _____

Disability_____ Onset _____ Family member? Y/N Veteran? Y/N 1st time Triumph Event? Y/N

## TRIUMPH FOUNDATION INSURANCE WAIVER & RELEASE OF LIABILITY FORM

In consideration of being allowed to participate in any way in TRIUMPH FOUNDATION's programs, related events, and activities, I and/or the minor participant, for myself, and on behalf of my heirs, assigns, personal representatives and next of kin, the undersigned:

1. Agree that prior to participating, I will inspect, or if a parent and/or legal guardian I will instruct the minor participant to inspect, the facilities and equipment to be used, and if I believe, to the best of my ability, that anything is unsafe, I and/or the minor participant will immediately advise TRIUMPH FOUNDATION of such condition(s) and refuse to participate.

2. Acknowledge and fully understand that I and/or the minor participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result from my own actions, inactions or negligence of others, the rules of play, or the condition of the premises or any equipment used. Further, that there may be other risks not known to me or not reasonably foreseeable at this time.

3. Assume all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.

4. To the fullest extent permitted by law release, waive, discharge and covenant not to sue TRIUMPH FOUNDATION, or its affiliates, their representative administrators, directors, agents, coaches, and other employees of the organization, other participants, sponsoring agencies, sponsors, advertisers, their heirs, and if applicable, owners and leasers of premises used to conduct the event, all of which are hereinafter referred to as "releasees", from demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasee or otherwise.

**I/WE HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I/WE HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, HAVE NOT CHANGED IT ORALLY, AND SIGN IT VOLUNTARILY.**

_____ **X**_____ _____

**Participant's Name (PLEASE PRINT CLEARLY)** **Signature** **Date**

**FOR PARTICIPANTS OF MINORITY AGE**

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of the releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE.

_____ **X**_____ _____

**Parent's Name (PLEASE PRINT CLEARLY)** **Signature** **Date**

## MEDIA RELEASE FORM

**MEDIA/PHOTO WAIVER:** I hereby authorize and give my full consent to TRIUMPH FOUNDATION to copyright and/or publish any and all photographs, videotapes and/or film in which I appear while attending this TRIUMPH FOUNDATION event. I further agree that TRIUMPH FOUNDATION may transfer, use or cause to be used, these photographs, videotapes, or films for any exhibitions, public displays, publications, commercials, art and advertising purposes, and television programs without limitations or reservations.

**X**_____ _____

Signature Date