

# General Event Participation Waiver Form

By signing this waiver form, you agree to release the organizers, sponsors, and affiliates from any liability related to your participation in the event. Please read the following terms carefully before completing this form.

## Participant Information

Full Name

Address

Phone Number

Email Address

## Release of Liability

I acknowledge and fully understand that participation in this event may involve inherent risks including, but not limited to, physical injury, property damage, or other unforeseen circumstances. By signing below, I voluntarily agree to assume all such risks and release the event organizers, sponsors, volunteers, and affiliated parties from any and all liability, claims, or causes of action arising from my participation.

## Medical Consent

In the event of injury or illness, I authorize the organizers to obtain medical treatment on my behalf. I agree to be responsible for any costs incurred for such treatment.



I have read, understand, and agree to the terms and conditions above.

Participant's Signature

Date

Parent/Guardian Name (if under 18)

Parent/Guardian Signature

