



Freddie Ford Family Foundation

A Missouri Nonprofit Corporation

P.O. Box 12454, St. Louis, MO 63132

PARTICIPANT WAIVER & RELEASE

I understand that my participation in the 2019 Heroes for Autism 5K Run and 1 Mile Fun Run/Walk (Event) involves risk of injury, including bodily injury, and assume the risk for same. I certify that I am physically fit and appropriately trained for the completion of this Event. I understand it is my responsibility to have my physical condition verified by my medical provider prior to participating in this Event. On my behalf and behalf of my heirs and legal representatives and to the fullest extent permitted by law, I hereby release and discharge Freddie Ford Family Foundation including their employees, agents, race officials, volunteers or any sponsor or contributor to this event, and successors (collectively known as "race organizers") of and from any and all liability for foreseeable and/or unforeseeable injury, death, damages and/or any other claims, demands, or losses, incurred by me in connection with any aspect of the event, even though the liability may arise out of negligence or carelessness on the part of the race organizers and/or other race participants.

I acknowledge that the entry fee paid is non-refundable and non-transferable. I understand that the Event is a public event, open to all who want to participate. As such, I understand that race organizers may take photographs of me in connection with this Event. I agree to allow my photo, video

• I certify that I have read the above, and I fully understand its content. I am aware that this is a release of liability and a contract and I sign it of my own free will.

Name (Printed) _____ Age on Date of Race _____

Signature _____ Date _____

PARENT OR GUARDIAN WAIVER FOR MINORS (UNDER 18 YEARS OLD)

The undersigned parent or guardian does hereby represent that he/she is, in fact, acting in such capacity, has consented to his/her child or ward's participation in the Event, and has agreed individually and on behalf of the child or ward, to the terms of the waiver and release of liability set forth above.

Child Name (Printed) _____

Parent or Guardian Name (Printed) _____ Age on Date of Race _____

Parent or Guardian Signature _____ Date _____