PERMISSION AGREEMENT, RELEASE AND WAIVER OF LIABILITY

Hamilton County Fair Ag Olympics

Participant Name: (print) _____
Participant Age: _____
Participant Phone Number: _____
Parent Name: (if participant is under 18): _____
Parent Phone Number: _____
County: Hamilton
Location of Activity: Hamilton County Show Arena
Date of Activity: Tuesday, July 19th

Permission, Release and Waiver of Liability

This Agreement and Release and Waiver of Liability shall be governed by and construed under the laws of the State of Iowa, which shall be the forum for any lawsuits arising from or incident to this Agreement.

In consideration for being allowed to participate in the Ag Olympics (the "Activity"), **I voluntarily agree to assume all risks of my or my child's participation in the activity**. I understand that participating in the Activity will expose me to above normal risks of injury or harm. These risks include uneven or hazardous locations, physical contact or collisions with other participants, officials, spectators or inanimate objects on or about the locations. I understand that this event is in itself hazardous and may result in injury to me or my child or other players. I understand that direct supervision will not be provided and by participating in the activity, **I expose myself and my child to the risk of injuries including but not limited to temporary or permanent muscle soreness, sprains, strains, cuts, abrasions, bruises, ligament and/or cartilage damage, head, neck, or spinal injuries, loss of use of arms and/or legs, eye damage, disfigurement or death**. I also recognize that there are both foreseeable and unforeseeable risks of injury or death that may occur as a result of my or my child's participation in the Activity which cannot be specifically listed. Further, I recognize that the actions of other people either affiliated or not affiliated with the event organizers may cause harm or loss to my or my child's person or property.

Please read additional information and provide signatures of permission on other side of this page.

I, _____(participant or parent or guardian if participant is under age 18) give my permission for the above named individuals to participate in the Ag Olympics. I hereby **RELEASE FROM LIABILITY AND COVENANT NOT TO SUE**, the State of Iowa; the Board of Regents for the State of Iowa; Iowa State University; ISU Extension and Outreach, and Hamilton County Agricultural Extension District, Hamilton County Fair Board, (, and all of their respective officers, employees, agents, volunteers, and anyone associated with the (name of event here) (the "Releasees") from any and all liability, claim and/or cause of action arising out of or related to any loss, damage or injury, including death, that may be sustained by me or my child, and anyone accompanying me, (including minors I am responsible for during this event) or to my property resulting, in whole or in part, from me or my child's participation in the Program, to the fullest extent permitted by law. In addition, the undersigned, on behalf of themselves and any personal representatives, heirs, assigns, and next of kin, **HEREBY AGREES TO INDEMNIFY AND HOLD HARMLESS** the Releasees from any and all liability for injury, including illness, disability, and death, and property loss or damage that may result from, arise out of, or be related to me or my child's participation in the Program, to the fullest extent permitted by law.

BY SIGNING THIS RELEASE AND WAIVER OF LIABILITY, I STATE THAT I HAVE READ AND UNDERSTAND THE CONDITIONS SET FORTH IN THIS RELEASE AND THAT I AGREE TO ALL CONDITIONS SET FORTH HEREIN, AND THAT I SIGN THIS VOLUNTARILY.

_____ _____

Date Participant Name (please print)

_____

Participant Signature

_____

Signature of Parent or Guardian (if Participant is under age 18)

NOTE: This Agreement and Release and Waiver of Liability must be signed by both the participant and the participant's legal guardian if the participant is not EIGHTEEN (18) YEARS OLD

By registering for this event, I understand that photos may be taken of me and/or my child during this event. I will contact the event organizer if I object to my or my child's image being used by Iowa State University Extension and Outreach.