

ZOMBIE RALLY / TROLLHAUGEN EVENT WAIVER & RELEASE

In consideration of the foregoing, I, for myself, my heirs, executors, administrators, personal representatives, successors and assigns, waive and release any and all rights, claims and courses of action I have or may have against Trollhaugen, Inc., host location, also any sponsors of this event and those civilian organizations contributing to this event to include their affiliates, agents, employees, officers, directors, sponsors, their representatives and successors, that may rise as a result of my participation in the Zombie Rally Survival Tag game and any pre- and post- event activities.

I am aware that the presence of physical obstacles containing mud, trees, people and water may present an added risk to injury during this privately organized event in addition to the injuries that may occur due to the physical requirements for completion of the game course.

I attest and verify that I am physically fit and have sufficiently trained for the completion of this event and/or a licensed medical doctor has verified my physical condition granting me clearance to participate.

I will permit emergency treatment in the event of injury or illness while participating.

I hereby grant full permission to any and all of the aforementioned entities to use any photographs, motion pictures, recordings, or any other record of my participation in this event for any legitimate purpose including commercial advertising.

I agree that I will remain in areas classified as "in-play" areas, and I will not enter "out of bounds" areas which include, but are not exclusive to wooded, non-trail areas, lift buildings, maintenance buildings, bodies of water, and/or roadways.

NAME

SIGNATURE

DATE

PARENT'S SIGNATURE
(IF UNDER 18-YEARS OLD)