SPECIAL ATHLETIC EVENT WAIVER OF LIABILITY

Missionary Omnium — (Name of Event)

Mar 23-24, 2013 — (Date)

All entrants are required to sign this waiver prior to participating in event.

I, the undersigned (³Applicant´) have applied to participate in a privately sponsored event that will use public right of way or public property under the jurisdiction of Walla Walla County (³the County´).

I have informed myself as to the level of supervision and control and the type of medical services that will be available. I understand that use of the County¶s name with the event does not mean that the County will supply any of those services but, instead, the County only has allowed the sponsor to use public right of way or public property for the event itself.

The County has not inspected the property and makes no representations whatsoever regarding its condition or fitness for a particular purpose.

I undersand and agree Walla Walla County intends to rely on these representations and my knowledge of the event.

In partial consideration of permission for me to enter this event, I hereby hold harmless, WAIVE, RELEASE and covenant not to sue Walla Walla County, its officers, employees and agents for myself, my heirs, executors and assigns, for any and all claims that may be legally obtainable for personal or bodily injury or property damage that I may suffer arising out of my participation in this event not caused by solely a wrongful act of Walla Walla County.

By my signature I certify that I am 18 years of age or older or am the parent or legal guardian of the applicant and make these representations on behalf of my child or ward.

Print Name	Signature	Date	< 18?	Parent/Guardian Sig. (if under 18)

Team Name:_____