

## PARTICIPANT WAIVER AND RELEASE OF LIABILITY AND INDEMNIFICATION FOR PROGRAMS/ACTIVITIES

Team Captain is responsible for collecting all necessary signatures and uploading this form into the online registration form or participants (or their parent/legal guardian) must sign at event check-in.

The County of Newberry Recreation Department ("COUNTY"), the Town of Prosperity ("TOWN"), the City of Newberry Parks, Recreation, & Tourism Department ("CITY"), and Piedmont Technical College (PTC) who are referred to collectively herein as ("PARTIES").

I, the undersigned (or on behalf of the underage participant), hereby assume all of the risks of participating in any and all activities and/or events associated with, sponsored, or held by PARTIES.

I acknowledge that there are certain risks to participants in these programs or activities and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that I/my child may sustain as a result of participation. I further agree to waive and relinquish all claims I/my child may have as a result of participating in these programs against the PARTIES, their officials, agents, volunteers, sponsors, and employees.

If I/my child am/is injured, become(s) ill, or need(s) medical attention for any reason, I authorize program staff to assist and to call for medical assistance. Myself/my child will be transported to the nearest medical facility as determined by emergency personnel. I understand I am responsible for all costs incurred in any such medical emergency.

I understand photographs of my/my child's participation in this program may be used by the PARTIES to promote the PARTIES' events and/or facilities, without compensation and without additional approval.

I certify that no health-related reasons or problems preclude my/my child's participation in this activity, including, but not limited to, having tested positive for COVID-19 within the ten (10) day period before the activity/event.

By signing this agreement, I acknowledge the contagious nature of covid-19 and voluntarily assume the risk that myself/my child may be exposed to or infected by covid-19 by attending the PARTIES programs, and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by covid-19 at the PARTIES programs may result from the actions, omissions, or negligence of myself and others, including, but not limited to, the PARTIES.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to myself/my child including, but not limited to, personal injury, disability, and death, illness, damage, loss, claim, liability, or expense, of any kind, that I or my child may experience or incur in connection with my/my child's attendance at the PARTIES programs. On my behalf, and/or on behalf of my child, I hereby release, covenant not to sue, discharge, and hold the PARTIES, their employees, agents, and representatives, of and from the claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any claims based on the actions, omissions, or negligence of the PARTIES, their employees, agents, and representatives, whether a covid-19 infection occurs before, during, or after participation in any of the PARTIES programs.

DIVISION:	<b>TEAM NAME:</b>	
Quad Puzzlers (team of 4)	OPuzzling Duos (team of 2)	O Puzzle Fanatics (team of 3 – youth only)
Team Captain Name	Team Captain Signature (must be 18 years of age or older)	
Team Member #2 Name	Team M	Member #2 Signature (or parent/legal guardian)
Team Member #3 Name	Team M	16mber #3 Signature (or parent/legal guardian)
Team Member #4 Name	Team M	Member #4 Signature (or parent/legal guardian)