

Volunteer Release and Waiver of Liability

Contact Information

Name: _____
Last First Middle

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____ Age: _____

Emergency contact: _____ Phone: _____

Relationship to volunteer: _____

Waiver

I do hereby represent that:

1. I am 18 years of age or older.
2. I recognize and appreciate any dangers and risks inherent in volunteering for Festival events.
3. I am submitting this release and waiver of liability declaration voluntarily and of my own free will.
4. I have no physical or emotional problems, nor any history thereof, which will impair my ability to volunteer for the Kentucky Derby Festival.
5. I hold harmless and agree to indemnify the Kentucky Derby Festival, its officers, directors, employees, agents and volunteers from all claims, liability, and damages I may sustain from any bodily injury, personal injury or property damage which may occur from any cause, including negligence, before, during or after any Kentucky Derby Festival event in which I participate as a volunteer.
6. I irrevocably grant the Kentucky Derby Festival and its agents, the exclusive right to use my name, likeness, photos or reproduction for any purpose including promotion, advertising or other purposes.
7. I acknowledge that I have read and understand this entire Waiver of Liability and Release, and I agree to be legally bound by it.

Signature _____

Witness signature _____

Print name _____

Print witness name _____

_____ Date

Signature of Parent or Legal Guardian (if volunteer is under age 18):

Parent or guardian Signature _____

_____ Date

Print name of parent or guardian _____