Name of **EVENT**: Kora Kares for Kids Ride-In and BBQ Competition Date: August 19, 2023

Location: Ossipee Valley Fairgrounds, South Hiram, ME

The undersigned (on my own behalf and on behalf of my heirs, personal representatives, successors and assigns), for and in consideration of the opportunity to participate in a Ride, (hereinafter, **EVENT**) sponsored and/or conducted by Shriner’s International, Shriner’s Hospital for Children, Kora Shriners, Widow Sons Grand Chapter and their respective officers, directors, employees and volunteers (hereinafter, the **“RELEASED PARTIES”**) releases and holds harmless the “**RELEASED** **PARTIES**” from any and all claims and demands, rights and causes of action of any kind whatsoever which I now have or later may have against the “**RELEASED** **PARTIES**” in any way resulting from, arising out of, or in connection with the performance of their Shrine Center duties and my participation in any said **EVENT**.

This Release extends to any and all claims I have or later may have against the “**RELEASED** **PARTIES**” resulting from or arising out of their Shrine Center duties whether or not such claims result from negligence (except willful neglect) on the part of any or all of the “**RELEASED** **PARTIES**” with respect to the EVENT or with respect to the conditions, qualifications, instructions, rules or procedures under which the **EVENT** is conducted or from any other cause. I UNDERSTAND THAT THIS MEANS THAT I AGREE NOT TO SUE ANY OR ALL OF THE “**RELEASED** **PARTIES**” FOR ANY INJURY RESULTING TO MYSELF OR MY PROPERTY ARISING FROM OR IN CONNECTION WITH THE PERFORMANCE OF THEIR CHAPTER DUTIES IN SPONSORING, PLANNING OR CONDUCTING THE **EVENT**.

I am experienced in and familiar with the operation of motorcycles and /or UTV’s and fully understand the risks and dangers inherent in operating a motorcycle or UTV. I am voluntarily participating in the **EVENT** and I expressly agree to assume the entire risk of any accidents or personal injury, including death, which I might sustain to my person and property as a result of my participation in the **EVENT**, and any negligence (except willful neglect) on the part of any or all of the “**RELEASED PARTIES**” in performing their Shrine Center duties.

By signing this Release, I certify that I have read this Release and fully understand it and that I am not relying on any statements or representations made by the “**RELEASED PARTIES**”.

**THIS IS A RELEASE – READ BEFORE SIGNING**

|  |  |
| --- | --- |
| **Rider / Operator** | **Passenger #1** |
| Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Date: 8/19/2023 | Date: 8/19/2023 |
|  |  |
| **Passenger #2** | **Passenger #3** |
| Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Date: 8/19/2023 | Date: 8/19/2023 |

**PARENT / GUARDIAN WAIVER FOR MINORS**

In the event that the participant is under the age of consent (18 years of age), then this release must be signed by a parent or guardian, as follows:

I hereby certify that I am the parent or guardian of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, named above, and do hereby give any consent without reservation to the foregoing on behalf of this individual.

Parent / Guardian Name: ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to minor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_