

Assumption of Risk, Release and Waiver of Liability

As consideration of the acceptance of this registration in the “St. John the Baptist - Gildehaus Polar Plunge”, (the “Program”) I, the undersigned, for myself and on behalf of any minor persons (the “Minors”) for whom I have by signing below given permission to participate in the Program, intending to be legally bound, hereby, for myself, for the Minors, and for me and my Minors' heirs, executors, administrators, waive and release any and all rights and claims for damages or otherwise that I or the Minors may have against any of the persons or entities involved in the organization or sponsorship of the Program, including but not limited to **St. John the Baptist-Gildehaus, City of Union, the Archdiocese of St. Louis**, and any persons working for or volunteering for any such entities, arising out of mine or the Minors' participation in the Program, even though that liability may arise out of negligence or carelessness on the part of the persons or entities named in this waiver. For myself and on behalf of the Minors, I/we assume all risks associated with participating in the Program, including but not limited to falls, contact with other participants or objects, the effects of weather, traffic and the conditions of the course or games, any injury or medical Program to me/us, all such risks being known and appreciated by me; I attest and verify that I/we will participate in the Program by training or otherwise competing, that I/we am/are physically fit and sufficiently trained for the completion of the Program, and that my/our physical condition has been verified by a licensed Medical Doctor; I hereby grant full permission to any and all of the aforementioned parties to use for any legitimate purpose my/our name(s) , likeness(es), and voice(s), as well as any photographs videotapes, motion pictures, recordings or any other record of the Program in which I/we may appear; and I waive any right to refund any of the registration fee for any purpose, including my/our failure to participate or cancellation of the Program. I also understand that by filling out this registration and paying my registration fees I am hereby agreeing to the Waiver for myself, and on behalf of any other minor person(s) for whom I have registered.

By signing here, or paying the registration fee online, I agree to the terms and conditions of the above Assumption of Risk, Release and Waiver of Liability.

Minor(s) Participants' Names _____

Adult's Name _____

Adult's relationship to minor(s) _____

Adult Participant's Name _____

Signature _____ Date _____

Co-Signature* _____ Date _____

*By parent or guardian, required if participant is under 18 years of age.