



## **2016 Catalina Trail Venture Waiver**

By indicating your acceptance, you understand, agree, warrant and covenant as follows:

In consideration of this entry acceptance, I, my heirs, executors and administrators hereby waive any and all rights of claim for damages I may have against Spectrum Sports Management, Inc. , The Santa Catalina Island Company, the Santa Catalina Island Conservancy, Los Angeles County Parks & Recreation, City of Avalon, Avalon Lions Club, Los Angeles County Fire, and all co-sponsors, or any individual associated with the above for any and all injuries sustained by me in this event. I will additionally permit the use of my name and pictures in broadcast, telecasts, newspapers, brochures, etc. I also understand that the entry fee is non-refundable and non-transferable. I further attest and verify that I am physically fit and have sufficiently trained for competition and my physical condition has been verified by a licensed medical doctor. THIS WAIVER MUST BE SIGNED BY EACH PARTICIPANT REGISTERED.

BY INDICATING YOUR ACCEPTANCE OF THIS AGREEMENT AND WAIVER, YOU ARE AFFIRMING THAT YOU HAVE READ AND UNDERSTAND THIS AGREEMENT AND WAIVER AND FULLY UNDERSTAND ITS TERMS. YOU UNDERSTAND THAT YOU ARE GIVING UP SUBSTANTIAL RIGHTS, INCLUDING THE RIGHT TO SUE. YOU ACKNOWLEDGE THAT YOU ARE SIGNING THE AGREEMENT AND WAIVER FREELY AND VOLUNTARILY, AND INTEND BY YOUR ACCEPTANCE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

I also understand that the entry fee is non-refundable and non-transferable.

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Signature of Athlete: \_\_\_\_\_ Date: \_\_\_\_\_

IF ATHLETE IS UNDER AGE 18: This is to certify that my son/daughter/minor has my permission to compete in the Long Beach Marathon and related events, is in good physical condition, and that the race medical officials have my permission to authorize emergency treatment and to have access to his/her records, if necessary.

Name of Parent / Legal Guardian (if Athlete is under 18): \_\_\_\_\_

Signature of Parent / Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_