

**SURVIVE SEATTLE: ACTING ZOMBIES / GENERAL VOLUNTEERS AGREEMENT
ACCIDENT WAIVER AND RELEASE OF LIABILITY**

OFFICIAL RELEASE/AGREEMENT: As consideration for being permitted by Win With Warriors to participate in Survive Seattle Zombie Run, I _____ hereby agree that I, my assignees, heirs, distributes, guardians and legal representatives will not make a claim against, sue or attach the property of Win With Warriors, the affiliates, partners, and Sponsors, for any and all injuries or damage arising from my participation in this event. I also give free use of my picture in any media, print, broadcast, telecast, or other account of this event.

ASSUMPTION OF RISK: I am aware that running/walking a Zombie Run is a strenuous and potentially dangerous activity. With knowledge of the risk involved, I hereby agree to accept any and all risks of injury or death. I represent and certify that I am physically fit and I have sufficiently trained for this event. I have carefully read this agreement and understand its contents. I'm aware that this is a release of liability, and a contract between myself, Win With Warriors, and the affiliates and Sponsors, and sign it of my own free will.

I voluntarily accept all risks of participating in the Survive Seattle Zombie Run, including my own actions, the actions of others (including but not limited to other participants, Survive Seattle Zombie Run staff, volunteers, and spectators), rough terrain, falls, illness, infection, contact with other participants, staff, volunteers, and spectators, premises defects, limited visibility, and the effects of weather including but not limited to heat, humidity and precipitation; I accept full responsibility for any injuries I may incur. **I also commit to abide by rules of no physical contact set forth by Survive Seattle organizers.**

I certify that I am physically fit and have no medical condition that would make my participation in the Survive Seattle Zombie Run more hazardous. I understand and acknowledge that my participation in Survive Seattle Zombie Run can be a dangerous activity and that the risk of injury, serious injury or death, cannot be eliminated.

I understand and acknowledge that all applicable rules for participation in the Zombie Run, and all directions and instructions given by Survive Seattle Zombie Run staff and volunteers, must be followed while participating in the Zombie Run. Should I sense or observe any hazard or unsafe condition, or feel unfit or unable to safely continue, **I undertake and agree to remove myself from participation** from the Survive Seattle Zombie Run. In event of emergency, I understand 911 may be called.

PROHIBIT WEAPONS: I hereby confirm that I will NOT use any of the following during the Zombie Run to include but not limited to: lasers, knives, firearms, blunt objects, aerosol sprays, energy conductive or stun weapons, animals, projectiles, pneumatic or compressed gas equipment, etc.

FILM AN PHOTOGRAPH RIGHTS: I consent to the use of my image photographed and/or voice to be included in the filming and/or recording of Survive Seattle for promotional purposes without compensation. *You are welcome to take photographs and film footage of my participation in this Event.*

I acknowledge that I am at least eighteen (18) years old, or that my parent or legal guardian has read this waiver in its entirety and has agreed to its terms.

PARENT/GUARDIAN WAIVER FOR MINORS (Under age 18)

The undersigned parent and natural guardian does hereby represent that he/she is, in fact, acting in such capacity and agrees to save and hold harmless and indemnify each and all of the parties referred to above from all liability, loss, cost, claim or damage whatsoever which may be imposed upon said parties because of any defect in or lack of such capacity to so act and release said parties on behalf of the minor and the parents or legal guardian.

I certify that I have carefully read this document and fully understand its content. I'm aware that this is a release of liability, and a contract between myself, Win With Warriors, and the affiliates and Sponsors, and sign it of my own free will.

Participant's **Signature** (Please **show ID**)

{date} _____
Email: _____

Participant's Name & Age (Please **print legibly**.)

{Emergency Contact} _____

Parent/**Guardian** Signature (If under **18** years old, Parent or Guardian **must** also sign.)

{date} _____