## Disney's Sports Waiver Form (Adult and Minor) Please Print Your Name:\_\_\_\_\_ Emergency Phone Number: Event Information Sport Type: Running Name of Event: Disney's 10K Classic 2001 - 3604 Waiver Section - Please Read and Sign Release and Indemnity (Adult – 18 years of age or over; Minor – under 18 years of age) **READ CAREFULLY BEFORE SIGNING** In consideration of my or my child's participation in the Event hosted by Disney Sports Attractions, LLC, I agree to assume the risks incidental to such participation and use (which risks may include, among other things, muscle injuries and broken bones) and, on my own or my child's behalf, and on behalf of my or my child's heirs, executors and administrators, release and forever discharge the released parties defined below, of and from all liabilities, claims, actions, damages, costs or expenses of any nature arising out of or in any way connected with my or my child's participation in such activity, and further agree to indemnify and hold each of the released parties harmless against any and all such liabilities, claims, actions, damages, costs or expenses, including, but not limited to, all attorney's fees and disbursements. For this event, and in the event that my child or I choose to participate in the NFL Experience at the Sports Complex, the released parties are Walt Disney World Co., Walt Disney Parks and Resorts, the National Football League Properties, Inc., the National Football League and its thirty-one (31) member professional football clubs, Party Planners West, Inc., Central Florida Bone and Joint Institute, their parent, related and affiliated companies, and the officers, directors, employees, agents, representatives, successors and assigns of each of the foregoing entities. I understand that this release and indemnity agreement includes any claims based on the negligence, action or inaction of any of the above released parties and covers bodily injury (including death) and property damage, whether suffered by me or my child, before, during or after such participation. I declare that I or my child are physically fit and have the skill level required to participate in this particular event. I further authorize medical treatment for myself or my child, at my cost, if the need arises. I also understand that my child or I may be required to leave the premises should my child or I exhibit undesirable conduct. I further grant the released parties the right to photograph and/or videotape me or my child and further to use my or my child's name, face, likeness, voice and appearance in connection with exhibitions, publicity, advertising and promotional materials without reservation or limitation. The released parties are, however, under no obligation to exercise said rights herein granted. This Agreement shall be governed by the laws of the State of Florida, and any legal action relating to or arising out of this Agreement shall be commenced exclusively in the Circuit Court of the Ninth Judicial Circuit in and for Orange County, Florida (or if such Circuit Court shall not have jurisdiction over the subject matter thereof, then to such other court sitting in said county and having subject matter jurisdiction). I certify I am 18 years of age or older.

Parent or Guardian: Print Name

Adult Signature Required

(Participant, Parent or Guardian)

Date