

EVENT WAIVER AND MEDIA AUTHORIZATION

Event Description:	(the "Event"). The
Event may occur on one day or may be a series of events over of the latter, the aggregate of the series of events shall be cons	a period of many days over a period of time, which in the case
responsibility to determine whether I am sufficiently fit an ACKNOWLEDGE AND ASSUME ALL OF THE RISKS limitation, physical and mental rigors associated with the actillness; contact or collision with other participants, spectate conditions; equipment failure; equipment and facility conditilevels; situations beyond the immediate control of the Event of without limitation death or disability), property damage or FULLY UNDERSTAND THIS WAIVER AND IN CONSID MYSELF AND ANYONE LEGALLY ACTING ON MY B NOT TO SUE, AND FURTHER INDEMNIFY AND HOLE and their respective officers, directors, shareholders, mem successors and assigns, from any and all claims, liabilities of injury, property damage, or any other loss, damage or inconversely. I agree to be familiar with and abide by the rules and regulation Event. I further accept sole responsibility for my own conductive MEDIA AUTHORIZATION I hereby grant full permission to use my name, photograph promotional purposes, including, but not limited to, online and television, magazine articles, websites, social media sites (inclubilication(s) at Hy-Vee's sole discretion, worldwide and consideration, except where prohibited by law. I hereby wait electronic matter that may be used in conjunction with their	a, likeness, biography, voice and/or video for advertising and ad on-air announcements, weekly circular ads, signage, posters, luding, but not limited to, Facebook and Twitter), and any other without limitation, and without additional compensation or ve any right to inspect or approve the finished photographs or m now or in the future, whether that use is known to me or sation arising from or related to the use of the image. I further
Participant:	
Participant Signature:	Date:
Print Name:	
Phone Number:	
Email Address:	(if 13 years of age or older)
Parent or Guardian's signature required if Participant is u	under 18 years of age (19 in NE):
Parent/Guardian Signature:	Date:
Print Name:	
Email Address:	
Emergency Contact:	
Emergency Contact Name:	

Emergency Contact Telephone Number: