

G★LDEN GAMES

WAIVER OF LIABILITY

On 5th day of September 2008, the 2008 Utah Golden Games committee will be hosting the Utah Golden Games at the South Towne Exposition Center. In consideration of your acceptance of my entry in the 2008 Utah Golden Games I, myself, my heirs, executors, administrators and assigns, forever release and discharge any/all rights, demands, claims for damages and cause of suit or action known or unknown, that I may have against the Utah Department of Health, Division of Aging, Utah Recreational Therapy Foundation, The Association of People Helping People, Inc., Utah Health Care Association, and any and all participating Sponsors, Directors, Officers, Employees, and Agents of such parties, said 2008 Utah Golden Games and any activities related thereto. I attest and verify that I have full knowledge of the risk involved in the Utah Golden Games, that I assume those risks, and that I will hold harmless any of the above parties in the event of an accident, illness, or other incapacity, regardless of whether I have authorized such expenses. I represent that I am in adequate physical condition to compete in this event.

SIGNATURE: _____ DATE: _____

WITNESS: _____

WITNESS: _____

PUBLICITY AUTHORIZATION

I, _____ Resident of _____
(Participant's name) (FACILITY)

Consent to be interviewed, to have my photograph taken, and/or be videotaped in conjunction with the 2008 Utah Golden Games.

It is my understanding that the interviews, photographs, and/or videotaping might be published as a part of the 2008 Utah Golden Games program/promotion. With this signature, I authorize publication.

RESIDENT SIGNATURE: _____ DATE: _____

I have observed the resident sign as above. The resident appeared to understand the nature of the agreement as stated.

WITNESS SIGNATURE: _____ DATE: _____

PLEASE RETURN FORM & REGISTRATION No Later than August 29, 2008 TO:

Tracy Evans
1317 Ptarmigan Loop
Park City, UT 84098

Questions please call: 435-645-8163
Email: Tracy@goldenolympiagames.com