

## Agreement and Waiver

By signing this waiver, you understand, agree, warrant and covenant as follows:

### REGISTRATION AGREEMENT AND LIABILITY WAIVER (the "Agreement and Waiver")

1. *Authority to Register and/or to Act as Agent.* You represent and warrant to The Association for the Prevention of Family Violence (APFV) that you have full legal authority to complete this event registration on behalf of yourself and/or any party you are registering (the "Registered Parties"), including full authority to make use of the credit card or check to which registration fees will be charged. If you are registering a child under the age of 18 or an incapacitated adult, you represent and warrant that you are the parent or legal guardian of that party and have the legal authority to enter into this agreement on their behalf and by proceeding with this event registration, you agree that the terms of this Agreement and Waiver shall apply equally to all Registered Parties. By registering a child under 13, you agree and consent to the collection of that child's information which you provide for the purposes of registration.
  2. *Waiver.* YOU UNDERSTAND THAT PARTICIPATION IN THE EVENT IS POTENTIALLY HAZARDOUS, AND THAT A REGISTERED PARTY SHOULD NOT PARTICIPATE UNLESS THEY ARE MEDICALLY ABLE AND PROPERLY TRAINED. YOU UNDERSTAND THAT EVENTS MAY BE HELD OVER PUBLIC PATHS, WATERWAYS AND FACILITIES OPEN TO THE PUBLIC DURING THE EVENT AND UPON WHICH HAZARDS ARE TO BE EXPECTED. PARTICIPATION CARRIES WITH IT CERTAIN INHERENT RISKS THAT CANNOT BE ELIMINATED COMPLETELY RANGING FROM MINOR INJURIES TO CATASTROPHIC INJURIES INCLUDING DEATH. YOU UNDERSTAND AND AGREE THAT IN CONSIDERATION OF BEING PERMITTED TO PARTICIPATE IN THE EVENT, YOU AND ANY REGISTERED PARTY, THE HEIRS, PERSONAL REPRESENTATIVES OR ASSIGNS OF YOU OR THE REGISTERED PARTY DO HEREBY RELEASE, WAIVE, DISCHARGE AND CONVEYANT NOT TO SUE APFV FOR ANY AND ALL LIABILITY FROM ANY AND ALL CLAIMS ARISING FROM PARTICIPATION IN THE EVENT BY YOU OR ANY REGISTERED PARTY.
  3. *Indemnification.* You agree to indemnify and hold APFV harmless from and against any and all damages, costs, claims or demands, including reasonable attorneys' fees, made by any third party due to or arising from or relating to your participation in this event or the violation of any term of this Agreement and Waiver.
  4. *Applicable Law; Consent to Jurisdiction.* By completing this event registration, both you and APFV agree that the statutes and laws of the State of Wisconsin, without regard to the conflict of laws principles thereof, will apply to all matters relating to this event registration, this Agreement and Waiver. You agree that exclusive jurisdiction for any dispute with APFV resides in the courts of the State of Wisconsin. You further agree and expressly consent to the exercise of personal jurisdiction in the courts of the State of Wisconsin in connection with any dispute including any claim involving APFV employees, volunteers, board members or director.
  5. *Severability.* You further expressly agree that this Agreement and Waiver is intended to be as broad and inclusive as is permitted by the law of the State of Wisconsin and that if any provision of this Agreement and Waiver shall be found to be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Agreement and Waiver and shall not affect the validity and enforceability of any remaining provisions.
- 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.

You must be over 18 years of age OR the parent/legal guardian of a minor under 18 years of age OR the legal guardian of an incapacitated and/or mentally challenged person in order to agree to the text above.

I agree to the above waiver \_\_\_\_\_

Date \_\_\_\_\_

Print name of participant \_\_\_\_\_

Signature of participant or parent/legal guardian \_\_\_\_\_