WORLD TRIATHLON CORPORATION ACKNOWLEDGMENT AND ASSUMPTION OF RISKS & RELEASE AND INDEMNITY AGREEMENT (2 Pages) For the parent/guardian of a minor participant IRONKIDS FUN RUN: Coeur d Alene

INFORMATION				
Name of Parent or Guardian:				
Parent's E-mail:			Maria.	
Parent's Telephone: Cell:			_ Work:	
Address:				
City, State, Zip:				
School District:	How did y	ou hear about this e	event?	
Insurance Carrier:	Policy #:			
Emergency contact information – if the Parent or Gu		0 9 1	-	
		Relationship:		
Telephone: Home:	Work: Birthdate		Cell: Boy / Girl	Youth Shirt Size:
Do any of your children participating in this event h	ave any of the following medical issues	n allergies? (Check all		
[] Asthma [] Allergies [] Cancer [] Fo		-		
[] Diabetes [] Epilepsy [] Heart disease				
[] Hemophilia [] High blood pressure [] L				
	- -			
Comments/Instructions: Name(s) of Applicable Child(ren):				
INTRODUCTION: Please read this entire Acknowled parent/natural guardian/legal guardian (hereafter collect sometimes "participant", "minor" or "child") must sign this that the child is under 18 years of age. In consideration (hereafter "Event") and other activities, I acknowledge <u>ACKNOWLEDGMENT AND ASSUMPTION OF RISKS</u> activities can cause injury, damage, death or other I agree to discuss this Form, and specifically, the act participant's activities: Risks present in an outdoor hail, snow and ice; hot or cold weather; stinging, venom is always unpredictable. Risks involved in decision m may misjudge a participant's capabilities, health or phys persons may not warn participant (and/or participant's p these activities includes the risk of colliding with objects health and participation risks. The risk that a particip whether disclosed or undisclosed, known or unknown, c cannot anticipate or eliminate risks or complications pos location may cause or contribute to delays or difficulties rocks, uneven ground or other conditions may exist in a volunteers, contractors or anyone associated with them supervision before, during and after the Event and other child's well-being. Risks regarding conduct. The pote criminal/terrorist activity. The potential that third party parent: falling partway or falling to the ground; bein becoming lost or disoriented; suffering gastro-intes heat or cold related illnesses or conditions; dehydra disability; mental or emotional trauma; concussions participates in the Event or other activities. I unders	ively referred to in this Form as "parent" or s Form. I acknowledge that the participant of the services of World Triathlon Corporat and agree as follows: <u>c</u> I acknowledge that the inherent risks, it oss to me, my child or others. I give per ivities and inherent risks, with my child. environment. Participants may be subject ous and/or disease-carrying insects and oth aking and conduct . These risks include the ical condition, misjudge some aspect of ins arrent) about one or more of the inherent ris or people (including participant/s or specta ant's mental, physical or emotional conditio combined with participating in and/or assisti- ised by a participant's mental, physical (inclu- in communication, transportation, evacuati- nd around the activities. Supervision and a will be supervising participant during the ad r activities, including during free time and at ntial that participant, co-participant/s and/or //s may commit criminal acts or acts of terro g struck; colliding with objects or people tinal complications or allergic reactions ation; hyponatremia; high altitude sickne- s; sunburn or other burns or other injury tand and agree:	"I") of the minor participar s my child, that I have the ion (hereafter "WTC") in a mazards and dangers (co mission for my child to The following describe to: high altitude; severe i her natural or man-made the risk that a WTC staff m truction, medical treatment ks of these activities. Run tor/s), tripping or falling d in (including any use or al ng with these activities co ding fitness level) or emo on or medical care. Risks activities risks. The par- tivities or at any time. The all other times, and agre third party/s may act in a rism. These and other in e; reacting to high altitu or experiencing other p s; heart or lung comply	nt (minors are those under 18 g e legal authority to act for the c allowing my child to participate oparticipate in and/or assist we as some, but not all of the inf storms or bad weather such as hazards. Hazards may not be nember, representative, volunte nt, weather, terrain, route locat nning risks. Participating and/ own or encountering other wat buse of alcohol or prescription buld result in injury, damage, de stional condition. Risks conne- s associated with premises. ent understand that neither WT ne parent agrees to take sole ro- te that the parent and child sha a negligent or intentional mann nherent risks may result in p ides, weather conditions or i problems. These and other ci lications; broken bones; par-	yrs. of age; hereafter child and on their behalf, and in the WTC competitive event Form as "risks") of these with all WTC activities and herent risks, as applicable to s lightning, strong winds, rain, marked or visible and weather eer, contractor or co-participant tion, or, that one of those /or assisting participants in ter/road/trail hazards. Personal or non-prescription drugs), eath or other loss. WTC cted with location. Activity Ruts, holes, water sources, TC or its staff, representatives, esponsibility for participant's are in the responsibility for the ter. Risk regarding articipants or an attending increased exertion; ircumstances may cause alysis or other permanent er the participant
I will review all materials received, accurately complete including the following code of conduct: 1) not consume including athletes, other volunteers, and spectators; 3) r	any drugs or alcohol that will impair his/her	judgment and/or ability;	2) respect the rights, dignity, a	nd worth of every individual,

- professionally, respectfully and take responsibility for his/her actions;
 My child's final acceptance and participation in the Event is contingent upon WTC's receipt and review of all required information and forms, including this Form;
- My child is fully capable of participating in activities without causing harm to him or herself or others. I further agree that I, in conjunction with my child's physician, am responsible for determining whether these activities are appropriate for my child, before he/she participates;
- WTC contracts with individuals or organizations that are independent contractors (not its employees or agents) to provide some of the services, and to conduct some of the activities
 participants will engage in. I acknowledge that WTC does not supervise or control these independent contractors and is not legally liable or responsible for their conduct. In addition,
 activities take place on premises or at facilities not owned or controlled by WTC, and WTC does not oversee or take responsibility for any aspect or condition of these independent
 facilities or premises;

The information provided above is not exhaustive, other unknown or unanticipated activities, inherent risks and outcomes may exist, and WTC cannot assure my child's safety or eliminate any of the inherent risks. WTC representatives are available should I or my child have further questions about the activities or the associated risks;

• I represent my child is voluntarily participating and/or assisting with knowledge of the inherent risks. Therefore, I agree that I, and my child, assume and accept full responsibility for the child, for the inherent risks (both known and unknown) of the activities, and for any injury, damage, death or other loss suffered by me or my child, resulting from those risks, including the risk of my child's and/or a co-participant's negligent or intentional misconduct.

RELEASE AND INDEMNITY: Please read Parts A and B carefully. This Release and Indemnity section contains a surrender of certain legal rights.

Part A: To the extent allowed by applicable law, I (the minor participant's parent) for myself, agree as follows:

to release and not to sue WTC, USAT, Event sponsors, Event organizers, Event promoters, Event producers, race directors, Event officials, Event staff, advertisers, administrators, contractors, volunteers, and all property owners and state, city, town, county, and other governmental bodies, and/or municipal agencies whose property and/or personnel are used and/or in any way assist in locations where the activities take place, and each of their respective parent, subsidiary and affiliated companies, assignees, licensees, owners, officers, directors, partners, board members, shareholders, members, supervisors, insurers, agents, employees, volunteers, contractors and representatives and all other persons or entities associated or involved with the activities (individually and collectively referred to in this Form as the "Released Parties"), with respect to any and all claims, liabilities, suits or expenses (including attorneys' fees and costs) (collectively referred to in this Form as "claim" or "claim/s") that I may have, for any injury, damage, death or other loss in any way connected with my child's enrollment or participation in and/or assistance with the activities). I understand I agree here to waive all claim/s I may have (for myself) against the Released Parties and agree that neither I, nor anyone acting on my behalf, will make a claim against the Released Parties for any loss I may suffer, if I or my child suffers injury, damage, death or other loss; to defend and indemnify ("indemnify" meaning protect by reimbursement or payment) the Released Parties with respect to any and I claim/s brought by or on behalf or me, my other person, for any injury, damage, death, lost and/or stolen property or other loss in any way connected with my child's enrollment or participating child or other person, for any injury, damage, death, lost and/or stolen property or other loss in any way connected with respect to any and I claim/s brought by or on behalf or me, my participating child or other person, for any other person

This Release and Indemnity section Part A includes claim/s resulting from any of the Released Parties' negligence (but not any of their intentional misconduct), and includes claim/s for personal injury or wrongful death (including claim/s related to emergency, medical, drug and/or health issues, response, assessment or treatment), property damage, loss of consortium, breach of contract or any other claim.

Part B: 1 (the minor participant's parent) for and on behalf of my participating minor child, agree as follows: I agree here to waive and release, in advance, any claim or cause of action against WTC or its owners, affiliates, employees or agents that would accrue to my minor child for personal injury, including death, and property damage resulting from an inherent risk in the activity. <u>NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN:</u> READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF WTC OR ITS OWNERS, AFFILIATES, EMPLOYEES OR AGENTS USE REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM WTC OR ITS OWNERS, AFFILIATES, EMPLOYEES OR AGENTS IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND WTC OR ITS OWNERS, AFFILIATES, EMPLOYEES OR AGENTS HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM. AND WTC OR ITS OWNERS, AFFILIATES, EMPLOYEES OR AGENTS HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM. To the extent allowed by applicable law, I agree to indemnify WTC or its owners, affiliates, employees or agents for any attorneys' fees and costs incurred by them in defending a claim or suit brought by or on behalf of my child (whether that claim or suit is initiated by me, my child or another party) that an arbitrator or court determines is barred under applicable law, or, if the claim is withdrawn or dismissed.

- OTHER PROVISIONS: I (the minor participant's parent), for myself and for and on behalf of my participating minor child, understand and agree:
 Any dispute or claim/s I or my child may have arising out of, relating to or in connection with this Form, my child's enrollment or participation in the activities, or any other aspect of my or my child's relationship with WTC: 1) shall be governed by Florida substantive law (without regard to its "conflict of law" rules) and 2) unless settled by direct discussions, shall be determined by binding arbitration as the sole and final remedy for all matters in dispute, administered by the American Arbitration Association ("AAA") in accordance with applicable
- Arbitration Rules as interpreted and governed by the Florida Arbitration Code. AAA arbitrator/s knowledgeable in the field and in commercial matters, acceptable to both the parent and WTC, shall conduct the arbitration. Required Venue: I agree that any arbitration proceeding, or any suit or other proceeding must be filed, entered into and/or take place only in Tampa, Florida.
- If my status as the minor participant's parent is challenged or found invalid, I will release, agree to defend and indemnify, and not to sue any of, the Released Parties, to the fullest extent allowed by law and per the provisions of this Form, just as if I were the participant's legal parent.
- In regard to my or my child's relationship with WTC, I agree that the contents of this Form will take precedence over any other forms or contracts I or my child may sign (for parties other than WTC) in connection with these activities.
- I authorize WTC staff, representatives, contractors or other medical personnel to obtain or provide medical care for my child, to transport my child to a medical facility, and to provide treatment (including but not limited to evacuation, hospitalization, blood transfusions, surgery and medications) they consider necessary for my child's health. I agree, under the Health Information Portability and Accountability Act (HIPAA) to the release (to or by WTC, USAT, insurance carriers, other health care providers and their staff, representatives or contractors) of any medical information or records necessary for treatment, referral, billing or other purposes.
- WTC reserves the right, in its sole discretion, to dismiss any participant from the activities at any time. If my child is dismissed or departs for any reason, I agree I am responsible for all costs of early departure.
- WTC, in its sole discretion, may delay, modify, or cancel the Event for any reason and I agree that WTC will not reimburse costs incurred by me, my child or other family member/s in preparation for or in connection with the Event if it is delayed, modified or cancelled.
- I grant to WTC, its affiliates, designees and assignees the right and permission to photograph, film, record and/or otherwise capture in any media the name, image, voice, written statement, photograph and/or visual likeness of me, my child and/or my other family members (collectively "images") during the activities or otherwise, without compensation, for use for any purpose in any media throughout the world in perpetuity, including but not limited to use in broadcasts, photographs, publications, podcasts, webcasts, motion pictures, brochures, CDs, DVDs, internet websites, television, and/or in any related commercial, informational, educational, advertising, or promotional materials. I understand that all ownership and copyright rights in the images shall be owned by WTC and I waive any inspection or approval rights.
- WTC may assign this Form to other entity/s or individual/s ("assignees") at any time, and any such assignment will grant assignees the full rights and protections accorded in this Form, consistent with WTC's and other Released Parties rights and protections under this Form.
- If I sign this Form both on-line and on-site, I agree that the on-site version of this Form, as that version may be amended from the on-line version, will be binding. I also understand that my child may be required to sign a version of this Form on-site.
- This Form is effective in regard to participant's enrollment or participation in and/or assistance with the activities from the date signed through the completion of all activities, and this Form shall remain in full force and effect following completion of all activities.
- This Form is intended to be interpreted and enforced to the fullest extent allowed by law. If any portion of this Form is deemed unlawful or unenforceable, it shall not affect the enforceability of the remaining provisions, and those remaining provisions shall continue in full force and effect.

<u>I, participant and parent/guardian of a minor participant agree</u>: I have carefully read, understand and agree to voluntarily sign this Form and acknowledge that it shall be effective and legally binding upon me/participant, my spouse and other children, my/participant's other family members and my/participant's heirs, executors, representatives, subrogors and estate. The minor participant, his/her guardian or minor participant and his/her parent must complete all information and sign below.

SIGNATURE OF PARENT/GUARDIAN	DATE	PRINTED NAME OF PARENT/GUARDIAN
PARTICIPANT SIGNATURE	DATE	PRINTED NAME OF PARTICIPANT
PARTICIPANT SIGNATURE	DATE	PRINTED NAME OF PARTICIPANT
PARTICIPANT SIGNATURE	DATE	PRINTED NAME OF PARTICIPANT