

## WEOC, Inc. Wings Etc., Inc. Participant Release of Liability

Participant Name



In consideration of being allowed to voluntarily participate undersigned acknowledge and agree that the risk of injury the potential for permanent paralysis and death, and while	y from the activities	or events involved	in significant, including
this risk, the risk of serious injury does exist. I knowingly	•		
or injury that may be sustained by participant or any prop			
known, even if arising from the negligence of the releases	0, 0		•
conditions for participation. If, however, I observe any unu will remove myself from participation and bring such to the	•	• • •	
I, for myself and on behalf of my heirs, next of kin, assigns			
charge, indemnify and hold harmless WEOC, Inc., d/b/a W ees, successors, and assigns, other participants, sponsori	•	•	
and lessors of premises used to conduct any activities or			
or damage to person or property, claims, demands and ac	tions whatsoever. I,	for myself and on	behalf of my heirs, next
of kin, assigns and personal representatives, hereby relea	, ,	•	•
Inc., its agents officers, directors, servants, employees, su sponsors, advertisers, and if applicable, owners and lesso			
any and all liabilities, injury, disability, death, loss or dama ever.	•	•	•
I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION DERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS INDUCEMENT.		,	,
X			
Participant's signature		Age	Date
For parents/guardians of participants of min	nor age (under	age 18 at time	of registration):
This is to certify that I, as parent/guardian with legal responses as provided above of all the releases and, for my state of the releases and the releases are releases and the releases and the releases are releases and the releases are releases are releases and the releases are released ar		•	•
fully understand its terms, and I release and agree to inde	-		
incidents to my minor child's involvement of participation negligence of the releasees, to the fullest extent permitted		as provided above,	even if arising from the
X	_		
Parent/Guardian Signature	Date	Emergency	Phone Number(s)