## **Adult Waiver Release Form**

Full Name:	Age:	DOB:
Address:		
Province: Postal Code:		
In consideration of being permitted to utilize the Soap		•
consideration of the benefits received by me as a resu		
executors, administrators, and assigns, hereby releas		_
covenant not to sue the Local Soap Box Derby, its spe		_
members, insurers, lessees, lessors, and associates	•	·
purpose herein referred to as Releases, from all liabili	•	
administrators, and assigns for all loss or damage, an	•	•
account of injury to my person or property or resulting	-	•
negligence of Releasees or otherwise while I am utilize	_	
facilities and/or observing any Soap Box Derby and/o		•
I hereby further agree to indemnify and to hold foreve		
and all claims, loss, liability, damage, or cost Release	•	• •
Creek while utilizing the above-described race track fa		
observing said Soap Box Derby races and/or events.	-	-
risk of bodily injury, death, or property damage due to	-	
utilizing the above described race track facilities and/o		•
Soap Box Derby races and/or events. I expressly agr		
agreement is intended to be as broad and inclusive as	=	-
Hines Creek and that if any portion thereof is held investigated the standard of the standard		•
notwithstanding, continue in full force and legal effect.	_	_
being permitted to utilize the above described racetra- observe Soap Box Derby races and/or events in Hine		•
Releases, their heirs, administrators, and executors o		_
action, of whatsoever kind or nature, either in law or in		
bodily injury or personal injuries known or unknown, or		,
occur as a result of my utilization of the above describ		
participation in and/or observation of Soap Box Derby		•
any activity in connection therewith, whether by neglig		
Print Participant Name		
Signature of Participant		
Date		
Witness Signature	_	

Date\_\_\_\_\_