Plunge Participant Form

Name: ____________________________________________________________

Address: __________________________________________________________________

Phone #: __________________________________________________________________

Email Address: __________________________________________________________________

Emergency Contact: __________________________________________________________

BA GOLF AND ATHLETIC CLUB - BROKEN ARROW PUBLIC SCHOOLS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

In consideration of participating in Broken Arrow Public Schools Freezin' for a Reason to benefit the Broken Arrow Public Schools Special Olympics teams, I represent that I understand the nature of the Freezin' for a Reason events and that I am qualified, in good health, and in proper physical condition to participate in such activity. I acknowledge that I believe event conditions are unsafe, I will immediately discontinue participation in the activity.

I fully understand that Freezin' for a Reason events involve risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the "releasees" named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I incur as a result of my participation in the activity.

I hereby release, discharge, and covenant not to sue BA Golf and Athletic Club or Broken Arrow Public Schools, its respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the "releasees" or otherwise, including negligent rescue operations; and I further agree that if, despite this release, waiver of liability, and assumption of risk, I make a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the releasees from any loss, liability, damage, or cost which any may incur as the result of such claim.

I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

Participant's Name ____________________________________________________

Participant's Signature __________________________________________________________________

Parent or Guardian’s Name if under 18 ________________________________________________

Parent or Guardian’s Name if under 18 ________________________________________________

Date ______________________________________________________________________