

NJ Sharing Network and NJ Sharing Network *Foundation*

5K Celebration of Life Waiver

1. I understand that my execution of this Waiver is a prerequisite for participation in the 5K Celebration of Life, including, but not limited to, training programs prior to the event (collectively the "Event").

2. I understand that in order to be allowed to participate in the Event, I agree to assume all risks and to release and hold harmless the NJ Sharing Network Foundation, and their affiliates, divisions, assigns, successors in interest, agents, servants, employees, officers, trustees and directors, past and present and each of them, and Blackbaud, its officers, agents, employees, assigns, successors in interest, contractors, vendors (and their agents), agencies, sponsors, officials, and volunteers, including walk leaders, participating communities and clubs and all government and public entities including, but not limited to, the State, County and local municipalities where the events take place (collectively the "Released Parties").

3. I understand and agree that this release will have the effect of releasing, discharging, waiving, and forever relinquishing any and all actions or causes of action that I may have or have had on my own behalf and on behalf of my survivors, heirs and estate, whether past, present or future, whether known or unknown, and whether anticipated or unanticipated by me, arising out of my participation in the Event. This release constitutes a complete release, discharge and waiver of any and all actions or causes of action against the Released Parties.

4. This release constitutes a complete release, discharge and waiver of any and all actions or causes of action against the Released Parties, including claims for wrongful death.

5. I understand and agree that this release applies to personal injury, property damage, or wrongful death that I may suffer, even if caused by the negligent actions or omissions of others. I understand that by agreeing to this release that I am assuming full responsibility for any and all risk of death or injury or property damage suffered by me while participating in the Event, including training prior to the Event. I understand and agree that this release will be binding on my heirs, my personal representatives, and my assigns.

6. I understand that I am solely responsible for my health and safety, and I acknowledge that I am physically capable of participating in and completing this Event. I understand that I must have valid health insurance at the time of the event.

7. I understand that I am responsible for my own safety on this event, and I will abide by all Event and traffic rules.

8. As a Volunteer: I understand that I will be part of the volunteer service organization on the Event.

9. I agree to allow the Released Parties, and their contractors, agencies and sponsors, the use of my name and likeness in connection with the Event for any purpose related to the advertising or promotion of the Event, worldwide in perpetuity in all forms of media now and forever known.

10. Should any portion of this Waiver be judicially determined invalid, voidable or unenforceable, for any reason, such portion of this Waiver shall be severable from the remaining portions herein and the invalidity, voidability, or unenforceability thereof shall not affect the validity, effect, enforceability, or interpretation of the remaining provisions of this Waiver. I have carefully read this Waiver and fully understand its contents. I am aware that this is a release of liability and I agree of my own free will.

11. I HAVE READ, UNDERSTAND AND ACCEPT ALL OF THE ABOVE, I CERTIFY THAT I AM AT LEAST 18 YEARS OF AGE. IF I AM NOT 18 YEARS OF AGE OR OLDER, MY PARENT OR LEGAL GUARDIAN HAS READ, UNDERSTAND AND ACCEPTS ALL OF THE ABOVE AND WILL BE SIGNING ON MY BEHALF.

******By selecting to register multiple registrants, you agree that all participants have read and agree to all terms and conditions as set forth in the waiver.*****

Print _____

Signature _____ **Date** _____