



ANY PERSON WHO WILL BE IN THE WATER (even to just get your feet wet!) MUST HAVE ONE OF THESE FILLED OUT. Make additional copies for your entire crew.

**United Way of Southwest Michigan 2024
Rock the Boat
PARTICIPANT WAIVER/HOLD HARMLESS AGREEMENT**

I, the undersigned, wish to participate in United Way of Southwest Michigan's "Rock the Boat" on Thursday, July 11, 2024. In doing so, I agree to **BRING AND WEAR** a US Coast Guard approved life jacket while in the water. **INITIAL:** (See attached list for required and recommended items).

I understand that the activities involved with the race contain an element of hazard or risk. I recognize the inherent danger involved and take full responsibility for my actions and physical condition. **INITIAL:**

In consideration of my participating in the race, I hereby, for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against United Way of Southwest Michigan, The Inn at Harbor Shores, City of St. Joseph, Berrien County and its employees, agents, representatives and successors and any other group or individual associated with this event for any personal injuries or property damage or loss suffered while engaged in the race activities. **INITIAL:**

I agree to indemnify and hold United Way of Southwest Michigan, The Inn at Harbor Shores, City of St. Joseph, Berrien County and any other group or individuals associated with the event and any of their servants, agents, officials or employees free and harmless from any liability, loss, cost or expense including attorney fees, which may result from my participation in the race activities. I agree that I am fully responsible for payment of all costs resulting from the rendering of medical aid and ambulance services to me as a participant in any race activities and I authorize that all necessary first aid steps may be taken as prescribed by qualified personnel. **INITIAL:**

United Way of Southwest Michigan maintains the right to deny my participation in the event if they feel that participation would risk loss or damage to any party. **INITIAL:**

I hereby grant United Way of Southwest Michigan permission to use my likeness in a photograph/video in any and all of its publications, including website entries, without payment or any other consideration. I understand and agree that these materials will become the property of the United Way and will not be returned. **INITIAL:**

I hereby irrevocably authorize United Way of Southwest Michigan to edit, alter, copy, exhibit, publish or distribute this photo/video for purposes of publicizing United Way's programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph/video. **INITIAL:**

Print Name of Participant		Date of Birth
Company		Phone
Address	City	Zip
Signature of Participant		Date
Contact in Case of Emergency		Phone Number of Emergency Contact