

**SPECIAL OLYMPICS ILLINOIS – VIRTUAL EVENT WAIVER (September, 2020)**

Participant Name: \_\_\_\_\_ Agency Name (if applicable) \_\_\_\_\_

Gender:  Female  Male Date of Birth: \_\_\_\_\_

Email: \_\_\_\_\_ This is  Athlete  Parent/Guardian email

In consideration of participating in Special Olympics Illinois virtual competitions or activities ("Activity"), I represent that I understand the nature of the activity and that I or my minor child/ward am qualified, in good health, and in proper physical condition to participate in such Activity. I understand that a physician's approval is highly recommended prior to participating in any type of fitness or exercise activity, and I hereby represent that I have either obtained a signed approval from my or my child's/ward's physician or that I or my minor child/ward acknowledge the risks inherent in such Activity but have elected to engage in said Activity without seeking prior approval by a physician. I acknowledge that if I or my minor child/ward believe event conditions are unsafe, I or my minor child/ward will immediately discontinue participation in the Activity.

I fully understand that the Activity involves risks of serious bodily injury, including viral infections, bacterial infections and other communicable diseases and illnesses, 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 or my minor child/ward incur as a result of my or my minor child's/ward's participation in the Activity.

I hereby release, discharge, and covenant not to sue Special Olympics Inc., Special Olympics Illinois, 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, or anyone on my and/or my minor child's/ward's behalf, makes 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, AND PARENTAL/GUARDIAN CONSENT AGREEMENT,



understand that I have given up substantial rights by registering for this event and procedure forward 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.

I give permission to Special Olympics Inc. and Special Olympics Illinois (collectively Special Olympics) and any of its employees, contractors, coaches or representatives to use my name and photo/video likeness in all forms to spread the mission and objectives of Special Olympics and for use in media for advertising, exposition displays, trade and any other lawful purpose.

Participant is own guardian:

By checking this box, I acknowledge that I have completely read and fully understand the information in this form.

OR Consent of Parent/Legal Guardian

By checking this box, I acknowledge as the parent/guardian of the above named participant, that I have completely read and fully understand the information in this form.

Printed Name of Parent/Guardian \_\_\_\_\_ Date: \_\_\_\_\_