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	Zip Code:			
articipate.				
By registering and participating in the Color Vibe Race Series you agree to the following release waiver: I know and understand that participating in a 5K run with color is a potentially hazardous activity. I know, recognize, understand, and appreciate these risks, realizing this is a strenuous activity which requires physical conditioning and hereby represent and certify that I am in good health and in physical condition to participate in this event. I assume all risks associated with running or walking in this event and acknowledge it carries with it the potential for property loss, serious injury, or death. I understand the risks include, but are not limited to, those caused by terrain, falls, contact with other participants, lack of hydration, traffic, obstacles, fire, weather, bee stings or bites, actions of other people including, but not limited to, participants, volunteers, spectators, coaches, event officials and event monitors, and/or Administrators of the event. All such and related risks being known and appreciated by me. I also agree to obey all laws while participating in the event. I also agree to immediately adhere to directions given me by event officials as well as law enforcement and emergency personnel.				
l acknowledge that this is a running and/or walking event that involves physical activity, is a test of my physical and mental limits and carries a potential for moderate and serious injury, death, property loss or damage. I also acknowledge that the Event involves spraying a corn-starch colorant ("Colorant") and may cause skin irritation, itching, burning, discomfort or vision problems, permanently stain or damage any of my personal belongings or property. I acknowledge the Event has properly warned of the effects involved with the Colorant, and advises me to wear proper eye, nose and mouth protection at all times. I understand the risks involved with attending the Event that may include, but not limited to: falls, slips, contact and/or crashes with other Attendees, injuries from contact with the Colorant, effects of weather including heat and/or humidity, cold, defective equipment, condition of the roads and/or course, rough terrain, heavy rain, water hazards, hazards posed by spectators or other Attendees, man-made or natural obstacles, wild animals, insects, and poisonous plants. I ASSUME ALL RISKS INVOLVED WITH THE EVENT, THE COURSE, EQUIPMENT AND THE COLORANT. I agree to monitor my health while participating in the Event, and will withdraw from the Event immediately and seek medical personnel if I believe continuing will present a risk to myself or other Attendees. I agree that I will fully inspect the course before participating, and notify the Event's personnel immediately of any hazardous situations. I agree to wear appropriate clothing and foot attire as established by industry standards and common safety practices during all activities at the Event. I acknowledge that I am not under the influence of alcohol, nor am I, nor will I be at the time of the event, under the influence of any drugs, including prescription, illegal or over-the counter medication, which could impair my ability to participate in the Color Vibe event. If I am taking medication, I affirm that I have seen a physician and have appro				
In consideration of the acceptance of my participation, I hereby for myself, or anyone else who might claim on my behalf, covenant not to sue, and waive, release, and discharge all companies involved with the organization of the color run, including all sponsors, partners, and affiliates, of this event from any and all claims or liability of any kind or nature whatsoever arising out of my participation in this event, even though such liability may arise out of negligence or carelessness on the part of event organizers, sponsors, partners and affiliates. I understand that by participating in this event, I acknowledge the acceptance of the terms and conditions within this release waiver. Participant or Guardian does hereby release and forever discharge Color Vibe from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the Participant's activities with Colo Vibe. The Participant or guardian acknowledges that Color Vibe does not carry or maintain any health, medical, or disability insurance for any Participants. It is understood that the Participant obtain his or her own health or medical insurance coverage as necessary.				
laving read and understood this waiver and in consideration of your accepting my entry, I for myself and anyone entitled to act on my behalf, waive and release Color Vibe, race organiz- rs and volunteers, land owners, and all sponsors, their representatives and successors from all claims or liabilities of any kind resulting from my participation in this event even though the ability may arise out of negligence or carelessness on the part of the persons named in this waiver.				
as or film footage that I may pres an irrevocable license to usen formation about me in connecuity, for marketing, promotional materials in any othe e purpose. I understand that per laft of my heirs, estate, success Color Vibe Run, TheColorVibes of any of the Event in which I services, shipping, manufactur or expenses (including attorned forever waive, release, discs a arising, directly or indirectly, so of property, bodily injuries, reparties MAKE NO REPREstance, be liable for consequer that it governs the legal rights hame, my likeness, my voice, a limited to, broadcast, telecast,	ovide) during and in connection with the race in while and reproduce, in whole or in part, the contents of ction with the race in which I am participating and th I, advertising, public relations or commercial purpos r medium. I grant permission to all the foregoing parets, bicycles, skateboards, roller-blades, or scooters are sors and assigns, to indemnify and hold harmless Co.com, all landowners, producers, sponsors, co-spor may participate and/or attend, and all employees, pers, designers, representatives, attorneys and insurys' fees and legal costs), arising from or in any man harges and covenants not to sue Released Parties in related to, in connection with or relating to my pa medical treatment and death), whether or not forese SENTATION OR WARRANTY, EXPRESS OR IMPLI and responsibilities of both me and the Released Pand/or my picture, singly or as part of composite or rand/or my picture, singly or as part of composite or rand/ormy picture, singly or as part of composite or rand/ormy picture, singly or as part of composite or rand/ormy picture, singly or as part of composite or rand/ormy picture, singly or as part of composite or rand/ormy picture, singly or as part of composite or rand/ormy picture, singly or as part of composite or rand/ormy picture, singly or as part of composite or rand/ormy picture, singly or as part of composite or rand/ormy picture, singly or as part of composite or rand/ormy picture, singly or as part of composite or rand/ormy picture, singly or as part of composite or rand/ormy picture, singly or as part of composite or rand/ormy picture, singly or as part of composite or rand/ormy picture, singly or as part of composite or rand/ormy picture, singly or as part of composite or rand/ormy picture, singly or as part of composite or rand/ormy picture, singly or as part of composite or rand/ormy picture, singly or as part of composite or part	ch I am partici- ithe Footage, ie production les via videos, rties to use any s are not Color Vibe, LLC nsors, advertis- principals, ers of each of of and from rticipation or eable or con- IED, acknowledge arties. Further, reproductions,		
	articipate. ease waiver: tivity. I know, recognize, under cod health and in physical con loss, serious injury, or death. I ther, bee stings or bites, action event. All such and related risk me by event officials as well a test of my physical and mental-starch colorant ("Colorant") a wiledge the Event has properly with attending the Event that n eat and/or humidity, cold, defect aide or natural obstacles, wild ee to monitor my health while er Attendees. I agree that I wilt thing and foot attire as establis nor will I be at the time of the or Vibe event. If I am taking m n. I attest and verify that I am eter prior to attending. I am cov incident, in which, in the reaso or attending the Event, includir vices. who might claim on my behalf, illiates, of this event from any a or carelessness on the part of s s within this release waiver. Pe ty first aid, treatment, or servic any health, medical, or disabil for myself and anyone entitled of mall claims or liabilities of any s waiver. heir representatives, successo is or film footage that I may press an irrevocable license to use information about me in conner uity, for marketing, promotional motional materials in any othe e purpose. I understand that p half of my heirs, estate, succes Color Vibe Run, TheColorVibe s of any of the Event in which I services, shipping, manufactur or expenses (including attorne and forever waive, release, disc s arising, directly or indirectly, so of property, bodily injuries, r PARTIES MAKE NO REPRES tame, my likeness, my voice, a imited to, broadcast, telecast, i mitted to, broadcast, telecast, i	State:		

suffer arising out of, connected with, or in any way associated with the race, program or activities. I have read and fully understand the above important information warning of risk, assumption of risk, waiver and release of claims. If any Event is canceled for any reason due to circumstances beyond reasonable control, the Event and/or Released Parties have no obligation to refund my entry fee or any other costs and/or expenses I incurred in connection with the Event. I understand that the bib is non-replaceable, and if lost my bib and entry will not be replaced. The Event and Released Parties have the right to reject my entry for any reason. This Waiver is a legally binding Agreement and will be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law. Any provisions found to be void or unenforceable shall be severed from this agreement, and not affect the validity or enforceability of any other provisions.

FOR ATTENDEES UNDER EIGHTEEN (18) YEARS OF AGE A PARENT OR LEGAL GUARDIAN MUST SIGN BELOW. Attendee's Parent or Guardian's signature below certifies that Attendee's son/daughter/ward has permission to participate/attend the Event. Attendee's Parent/Guardian has read and understands the foregoing WAIVER AND RELEASE AGREEMENT (above) and by signing intentionally and voluntarily agrees to its terms and conditions. Attendee's Parent/Guardian further certifies that such son/daughter/ward is in good physical condition and is able to safely participate in the Event. Attendee's Parent/Guardian hereby authorizes medical treatment for such son/daughter and grants access to such child's medical records as necessary and as stated above. I have read this document and I fully understand its content, warning of risk, assumption of risk and waiver and release of all claims. I understand that by signing below, I have given up substantial rights. I have voluntarily signed this release. By signing below you agree, warrant and covenant as follows. I HEREBY AFFIRM THAT I AM

EIGHTEEN (18) YEARS OF AGE OR OLDER. I HAVE READ THIS DOCUMENT		
* If participant is under 18, a parent or legal guardian must sign in Signature:	in their behalf.	FOR OFFICE USE ONLY
oignature		Event :
Printed Name	Date: 021-16 tcv	Notes: