RELEASE OF LIABILITY - READ BEFORE SIGNING

| In co | consideration of being allowed to partic | ipate in any way in | the programs of HIBBING CURU. | |
|-------------------------------|--|---|--|--|
| | The state of the s | | acknowledges, appreciates and agrees that: | |
| 1. | The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular skills, equipment and personal discipline may reduce this risk, the risk of serious injury does exist; and | | | |
| 2. | I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and | | | |
| 3. | I will agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual, significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the Club and the USCA immediately; and | | | |
| 4. | I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, THE CLUB AND THE USCA, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used for the activity ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH or loss or damage to person or property associated with my presence or participation, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law. | | | |
| FUL RIG | HAVE READ THIS RELEASE OF LIAI ULLY UNDERSTAND ITS TERMS, UN IGHTS BY SIGNING IT, AND SIGN IT IDUCEMENT. | NDERSTAND THA | AT I HAVE GIVEN UP SUBSTANTIAL | |
| x | | Age: | Date Signed: | |
| | | | PANTS OF MINORITY AGE F REGISTRATION) | |
| agre assig liabi EVE | abilities incident to my minor child's inve | of all the Releasees, e to indemnify and l olvement or particip | | |
| x | | | Date Signed: | |
| PA | PARENT/GUARDIAN'S SIGNATURE | (print name) | | |