



MAY 12TH – 15TH 2010 - GOAL FOUNDATION VOLUNTEER WAIVER FORM

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Date of Birth: _____ Shirt Size: _____

1. Event.

It is my desire to participate as a GOAL Foundation Volunteer in the event listed above (the "Event"). Prior to my participation as a Volunteer in the Event, I acknowledge that there are certain risks associated with my participation as a Volunteer, including, by way of example, physical injury due to event-related accidents, physical injury due to transportation-related accidents, illness, or even death. In addition, I acknowledge that there may be other risks inherent in my participation as a Volunteer in the Event of which I may not be presently aware.

2. Release of Liability.

By signing this GOAL Foundation Volunteer Waiver Form, I expressly warrant that I am capable of withstanding both the physical and mental demands of the Event. I expressly assume all risks associated with my participation as a Volunteer in the Event, whether such risks are known or unknown to me at this time. In addition, I hereby release GOAL Foundation; its affiliated corporations and charities; the host city(ies); any affiliated county and state agency or organization; USATF; and/or any and all municipal agencies whose property and/or personnel are used in any way to assist in the Event; together with their leaders, members, employees, volunteers, and agents (collectively the "Released Parties") from any claim that I may have against them as a result of injury, illness, or other claim that may arise during the course of my participation as a Volunteer in the Event. This release of liability is also intended to cover all claims that members of my family or estate, heirs, representatives, or assigns may have against the Released Parties for any injury, illness, or other claim that may arise during the course of my participation as a Volunteer in the Event.

I further agree to indemnify and hold the Released Parties harmless from any and all claims arising from my participation as a Volunteer in the Event.

3. Publicity.

I agree to the use of my name and photograph, without compensation, in broadcasts, newspapers, brochures and other media recorded, captured, and/or obtained in connection with the Event.

I HAVE READ AND FULLY UNDERSTAND THIS DOCUMENT, INCLUDING THE FACT THAT I AM RELEASING AND WAIVING CERTAIN POTENTIAL RIGHTS HELD BY ME AND VOLUNTARILY AND FREELY AGREE TO THE TERMS AND CONDITIONS SET FORTH IN THIS VOLUNTEER WAIVER FORM. I AGREE THAT THIS DOCUMENT SHALL BIND MY GUARDIAN, ASSIGNS, HEIRS, ADMINISTRATORS AND EXECUTORS FOREVER.

Signature

Date