

# FUN RUN PARTICIPANT WAIVER AND RELEASE OF LIABILITY

I understand that my participation in the Jackson High School Fun Run, scheduled for September 27, 2025, involves physical activity and may include inherent risks. I voluntarily agree to allow my child to participate in this event and hereby acknowledge and agree to the following terms:

Assumption of Risks: I understand that participating in the fun run may involve risks, including but not limited to the risk of injury or illness. These risks may arise from various factors, including, but not limited to, the condition of the course, the actions of other participants, weather conditions, and other unforeseen events.

Medical Fitness: I certify that my child is in good physical condition and has no known medical conditions that would prevent his/her participation in this event. I am solely responsible for determining his/her fitness level and ability to participate.

Release of Liability: In consideration for being allowed to participate in the fun run, I hereby release and discharge Jackson City Schools, its employees, volunteers, sponsors, and all affiliated individuals and organizations from any and all claims, liabilities, demands, actions, or causes of action, whether in law or equity, arising from participation in this event. This release applies to any and all injuries, damages, or losses, including but not limited to personal injury, property damage, or wrongful death, whether caused by negligence or any other fault.

Photo/Video Release: I grant Jackson City Schools and its affiliates the right to use photographs, videos, or other media of my child taken during the event for promotional, marketing, and advertising purposes without compensation.

Agreement to Follow Rules: I agree to follow all rules, instructions, and guidelines provided by Jackson City Schools and its representatives before and during the event.

Parent/Guardian Consent (if participant is under 18 years old): I am the parent/legal guardian of the minor named above, and I hereby consent to their participation in the Jackson City Schools Fun Run and agree to all the terms and conditions outlined in this waiver on their behalf.

I have carefully read and fully understand this waiver and release of liability. I acknowledge that I am voluntarily participating in the Jackson City Schools Fun Run, and I agree to be bound by the terms herein.

Participant's Full Name: _____

Participant's Date of Birth: _____

Participant's Signature: _____

Parent/Guardian Name : _____

Parent/Guardian Signature: _____

Date: _____