jonesbrown
Insurance Brokers + Consultants

BURNT RIVER OFFROAD VEHICLE FACILITY

MINOR PARTICIPANT ASSUMPTION AND ACKNOWLEDGMENT OF RISK

Burnt River Off-Road Vehicle Facility

Description and location of scheduled event(s) (the "EVENT) _____

Date release signed _____

I UNDERSTAND AND AGREE, on behalf of myself, my heirs, assigns, personal representatives and next of kin, that my participation in the **EVENT** is not permitted without my execution of this document. I hereby warrant and agree that:

_____

1. I know that there are significant risks including the risk of serious injury or death associated with participation, whether as a competitor, student, official or worker in all forms of motor sport and in particular in being allowed to enter, for any reason, any restricted area; and

2. I acknowledge and accept these risks and all other risks associated with participation in this **EVENT** even if arising from negligence or gross negligence, including any worsening of injuries caused by negligent rescue operations or procedures, of the event organizer, the event venue(s) and of any and all persons associated therewith or participating therein; and

3. I understand that all applicable rules for participation must be followed, regardless of my role, and that at all times THE SOLE RESPONSIBILITY FOR MY PERSONAL SAFETY REMAINS WITH ME;

4. I will immediately remove myself from participation in the **EVENT** and notify the nearest official, if at any time I sense any unusual hazard or unsafe condition or if I feel that I have experienced any deterioration in my physical, emotional or mental fitness, or that of my protective clothing, gear or equipment, for continued safe participation in the **EVENT**; and

5. I am _____ years of age.

I HAVE READ AND UNDERSTAND THIS DOCUMENT AND I AM AWARE THAT BY SIGNING THIS ASSUMPTION AND ACKNOWLEDGMENT OF RISK I AND/OR MY PARENTS/GUARDIANS MAY SURRENDER CERTAIN LEGAL RIGHTS.

I SIGN THIS DOCUMENT VOLUNTARILY AND WITHOUT INDUCEMENT

Signature of Minor Participant	*Printed Name of Minor Participant*	*Age*	*Signature of Witness*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____