Lincoln Days celebration, inc.

PIONEER GAMES

LINCOLN DAYS CELEBRATION

RELEASE OF RESPONSIBILITY

IN CONSIDERATION OF YOUR ACCEPTING MY ENTRY AND MY PARTICIPATION IN THE EVENTS OF LINCOLN DAYS CELEBRATION, THE FIRST WEEKEND OF OCTOBER, I DO HEREBY RELEASE FOREVER ANY AND ALL RIGHTS AND CLAIMS FOR DAMAGES I MAY ACCRUE AGAINST ANY AND ALL PERSONS, BUSINESSES, AGENCIES AND OTHER PARTICIPANTS, INCLUDING BUT NOT LIMITED TO, LINCOLN DAYS CELEBRATION, INC., ITS OFFICERS AND BOARD OF DIRECTORS, THE ORGANIZERS, SPONSORS, WORKERS, OFFICIALS, VOLUNTEERS, THE CITY OF HODGENVILLE, LARUE COUNTY, KENTUCKY AND REPRESENTATIVES, ASSIGNS, GROWING OUT OF MY PARTICIPATION IN THE LINCOLN DAYS CELEBRATION INCLUDING TRAVEL TO AND FROM SAID EVENTS.

INDIVIDUAL OR TEAM NAME:

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PARTICIPANT NAME: AGE: CITY: SIGNATURE:

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PARTICIPANTS UNDER AGE 18 MUST HAVE PARENT/GUARDIAN SIGNATURE