

TRAIL PITTSBURGH ACCIDENT WAIVER AND RELEASE OF LIABILITY

I acknowledge that Pittsburgh Trails Advocacy Group (d/b/a Trail Pittsburgh) events carry with them the potential for death, serious injury and property loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, physical condition of participants, equipment, lack of hydration, vehicular traffic, actions of other people including, but not limited to, participants, volunteers, spectators, coaches, event officials, and event monitors, and/or producers of the event. These risks are inherent to all volunteers or participants. I hereby assume all of the risks of participating and/or volunteering in this event. I realize that liability may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained or controlled by them or because of their possible liability without fault. I certify that I am physically fit and have not been advised otherwise by a qualified medical person.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by the event holders, sponsors and organizers, in which I may participate and that it will govern my actions and responsibilities at said events. In consideration of permitting me to participate in this event, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assign as follows: (A) Waive, Release and Discharge from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me including my traveling to and from this event, *THE FOLLOWING ENTITIES OR PERSONS: Pittsburgh Trails Advocacy Group (d/b/a Trail Pittsburgh)*, their directors, officers, employees, volunteers, representatives, and agents, the event holders, event sponsors, event volunteers; (B) Indemnify and Hold Harmless the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this event, whether cause by the negligence of releases or otherwise.

I hereby consent to receive medical treatment that may be deemed advisable in the event of injury, accident, and/or illness during this event. I understand that at this event or related activities, I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and assigns. This Accident Waiver and Release of Liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law. This Accident Waiver and Release of Liability shall be in full force and effect and shall also apply to any and all of my/the Participant's future events with Pittsburgh Trails Advocacy Group (d/b/a Trail Pittsburgh) for the period of one (1) year from the date of the below signature. By signing this waiver, I agree to become a social member of Pittsburgh Trails Advocacy Group (d/b/a Trail Pittsburgh).

I hereby certify that I have read this document and I understand its content.

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