



Nero Piedmont 2009-2010

Legal Release Form

NERO Piedmont activities, like any other active sport, involve a certain risk of injury. NERO Piedmont requires that each participant have a thorough understanding of the risks involved in this sport.

I, the undersigned, understand that NERO Piedmont has taken all precautions and reasonable steps to minimize all risks to participants, but is unable to completely guarantee that no injury will come to me. Since the events are mainly conducted outdoors in wilderness areas, there is always the possibility of accidents due to weather, darkness, terrain or unforeseen occurrences. Furthermore, since I may also be participating in mock battles using padded foam weapons, there is a risk of injury from other participants. While NERO Piedmont is committed to safety at each event, it is not possible to control the actions of individuals.

I understand the risks involved in participating in events sponsored by NERO Piedmont. I shall make no claim of any description against the organization, its members or its officers, or any company doing business with the organization for any loss or damage suffered in the course of participating.

I confirm that I am in good physical health and do not suffer from any physical disabilities unknown to the organization.

I agree also to the following restrictions placed upon me by NERO Piedmont:

- I will not bring or consume alcoholic beverages or illegal drugs during the event;
- If under the age of 18, I will not smoke during the event and will abide by non-smoking designated areas;
- I will abide by all Local, State and Federal laws while attending the event;
- I will not use any of the skills taught me by the organization for illegal purposes;
- Unless I submit a written and signed request stating the opposite, I will allow the organization, for promotional purposes, to photograph, film, or videotape me participating in the event;
- I will at all times abide by the safety rules of NERO Piedmont and the NERO organization.
- I understand that failure to abide by these agreements could result in expulsion from the organization, in the extreme, legal action.

By my signature, I confirm that I have read this release, and understand its terms, and agree to its provisions. I understand that this form affects my legal rights.

Signature of Participant

Signature of parent or legal guardian if under 18

Print Name

Date of Birth

Address

Phone

City, State and Zip

Today's Date