WAIVER AND RELEASE OF LIABILITY

In consideration of the risk of injury while participating inEmpty Cradle Walk to Remember 2018 (the "Activity"), and as consideration for the right to participate in the Activity, I hereby, for myself, my heirs, executors, administrators, assigns, or personal representatives, knowingly and voluntarily enter into this waiver and release of liability and hereby waive any and all rights, claims or causes of action of any kind whatsoever arising out of my participation in the Activity, and do hereby release and forever discharge Empty Cradle, located at 9880 N Magnolia Ave # 154, Santee, California 92071, their affiliates, managers, members, agents, attorneys, staff, volunteers, heirs, representatives, predecessors, successors and assigns, for any physical or psychological injury, including but not limited to illness, paralysis, death, damages, economical or emotional loss, that I may suffer as a direct result of my participation in the aforementioned Activity, including traveling to and from an event related to this Activity.

I AM VOLUNTARILY PARTICIPATING IN THE AFOREMENTIONED ACTIVITY AND I AM PARTICIPATING IN THE ACTIVITY ENTIRELY AT MY OWN RISK. I AM AWARE OF THE RISKS ASSOCIATED WITH TRAVELING TO AND FROM AS WELL AS PARTICIPATING IN THIS ACTIVITY, WHICH MAY INCLUDE, BUT ARE NOT LIMITED TO, PHYSICAL OR PSYCHOLOGICAL INJURY, PAIN, SUFFERING, ILLNESS, DISFIGUREMENT, TEMPORARY OR PERMANENT DISABILITY (INCLUDING PARALYSIS), ECONOMIC OR EMOTIONAL LOSS, AND DEATH. I UNDERSTAND THAT THESE INJURIES OR OUTCOMES MAY ARISE FROM MY OWN OR OTHERS' NEGLIGENCE, CONDITIONS RELATED TO TRAVEL, OR THE CONDITION OF THE ACTIVITY LOCATION(S). NONETHELESS, I ASSUME ALL RELATED RISKS, BOTH KNOWN OR UNKNOWN TO ME, OF MY PARTICIPATION IN THIS ACTIVITY, INCLUDING TRAVEL TO, FROM AND DURING THIS ACTIVITY.

I agree to indemnify and hold harmlessEmpty Cradle against any and all claims, suits or actions of any kind whatsoever for liability, damages, compensation or otherwise brought by me or anyone on my behalf, including attorney's fees and any related costs, if litigation arises pursuant to any claims made by me or by anyone else acting on my behalf. If Empty Cradle incurs any of these types of expenses, I agree to reimburse Empty Cradle.

I acknowledge that Empty Cradle and their directors, officers, volunteers, representatives and agents are not responsible for errors, omissions, acts or failures to act of any party or entity conducting a specific event or activity on behalf of Empty Cradle.

I ACKNOWLEDGE THAT THIS ACTIVITY MAY INVOLVE A TEST OF A PERSON'S PHYSICAL AND MENTAL LIMITS AND MAY CARRY WITH IT THE POTENTIAL FOR DEATH, SERIOUS INJURY, AND PROPERTY LOSS. The risks may include, but are not limited to, those caused by terrain, facilities, temperature, weather, lack of hydration, condition of participants, equipment, vehicular traffic and actions of others, including but not limited to, participants, volunteers, spectators, coaches, event officials and event monitors, and/or producers of the event.

I ACKNOWLEDGE THAT I HAVE CAREFULLY READ THIS "WAIVER AND RELEASE" AND FULLY UNDERSTAND THAT IT IS A RELEASE OF LIABILITY. I EXPRESSLY AGREE TO RELEASE AND DISCHARGE Empty Cradle AND ALL OF ITS AFFILIATES, MANAGERS, MEMBERS, AGENTS, ATTORNEYS, STAFF, VOLUNTEERS, HEIRS, REPRESENTATIVES, PREDECESSORS, SUCCESSORS AND ASSIGNS, FROM ANY AND ALL CLAIMS OR CAUSES OF ACTION AND I AGREE TO VOLUNTARILY GIVE UP OR WAIVE ANY RIGHT THAT I OTHERWISE HAVE TO BRING A LEGAL ACTION AGAINST Empty Cradle FOR

PERSONAL INJURY OR PROPERTY DAMAGE.

Signature:

To the extent that statute or case law does not prohibit releases for negligence, this release is also for negligence on the part of Empty Cradle, its agents, and employees.

In the event that I should require medical care or treatment, I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance.

In the event that any damage to equipment or facilities occurs as a result of my or my family's willful actions, neglect or recklessness, I acknowledge and agree to be held liable for any and all costs associated with any actions of neglect or recklessness.

This Agreement was entered into at arm's-length, without duress or coercion, and is to interpreted as an agreement between two parties of equal bargaining strength. Both the Participant,, and Empty Cradle agree that this Agreement clear and unambiguous as to its terms, and that no other evidence will be used or admitted alter or explain the terms of this Agreement, but that it will be interpreted based on the language in accordance with the purposes for which it is entered into.				
severable or invalid, or if any determined to be unlawful or remain in full force and effect, parties. If a court should find the but that by limiting said provision	term, condition, phrase or po otherwise unenforceable, the re so long as the clause severed at any provision of this agreeme	of Liability shall be deemed to be rtion of this agreement shall be emainder of this agreement shall does not affect the intent of the ent to be invalid or unenforceable, orceable, then said provision shall		
In the event of an emergency, p	please contact the following perso	on(s) in the order presented:		
Emergency Contact	Contact Relationship	Contact Telephone		
signing this agreement. I certify	that I have read this agreement, modified orally. I am aware that	rears or older, and that I am freely that I fully understand its content this is a release of liability and a		
Participant's Name:				
Participant's Address:				

Date:	

PARENT / GUARDIAN WAIVER FOR MINORS

nust be signed by a parent or guardian, as follows:	riease
hereby certify that I am the parent or guardian of, rabove, and do hereby give my consent without reservation to the foregoing on behalf andividual.	named of this
Parent / Guardian Name:	
Relationship to Minor:	
Signature:	
Date:	