

**SPECIAL OLYMPICS Alaska**  
**RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, INDEMNITY, CONSENT TO USE OF**  
**PHOTOGRAPHS AND PARENTAL CONSENT AGREEMENT ("AGREEMENT")**

In consideration of participating in the Special Olympics Alaska Virtual or In-person Polar Plunge ("Event"), I represent that I understand the nature of the Event and that I and/or my minor child am qualified, in good health, and in proper physical condition to participate in such Event. I acknowledge that if I and/or my minor child believe Event conditions are unsafe, I and/or my minor child will immediately discontinue participation in the Event.

I fully understand that the Virtual or In-person Polar Plunge Event may involve risks of serious bodily injury, including hypothermia, frostbite, heart or circulatory issues, viral infections, bacterial infections and other communicable diseases and illnesses, muscle injuries, back injuries, permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the Event, the conditions in which the Event takes place, or the negligence of the "Releasees" named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I and/or my minor child incur as a result of my and/or my minor child's participation in the Event.

I understand that I am selecting how to participate in the Virtual or In-Person Polar Plunge and acknowledge that although unlikely, there may be some hazards associated with the Event (up to and including death), depending on the activity that I choose and individual health issues. For example, an ice bucket activity that requires lifting a heavy container of liquid may pose a risk of injury to the back or to muscles, a sudden dousing with ice water may cause a shock to the heart, and failing to dry off and warm up promptly may lead to hypothermia and related issues. I also acknowledge that I should not participate if I feel the activity I selected poses any risk to my health or the health of my minor child, well-being, personal property, or anything else. I hereby certify that I, and/ or my minor child, am in good health and voluntarily assume all risks to person and property associated with this Event.

Participants must follow all Polar Plunge instructions, whether participating in-person at Goose Lake or virtually in a home setting.

An adult, age 21 or older, is required to be present with all minor participants during preparation for and during the conduct of the Event. This adult will be responsible for the minor participants at all times including but not limited to practice outside of the Event and during the conduct of the Event. The Releasees are not responsible for participant's supervision at any time in connection with the Event.

I hereby release, discharge, and covenant not to sue Special Olympics, Inc., Special Olympics Alaska, its respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, and advertisers (each considered one of the "RELEASEES" herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the "Releasees" or otherwise, and I further agree that if, despite this release, waiver of liability, and assumption of risk I, or anyone on my and/or my minor child's behalf, makes a claim against any of the Releasees, I will

indemnify, save, and hold harmless each of the releasees from any loss, liability, damage, or cost which any may incur as the result of such claim.

If I choose to voluntarily provide Special Olympics Alaska with photographs or videos of my participation, or my minor child's participation, in the Event, Special Olympics Alaska has my permission forever to use my (or my minor child's) likeness, name, voice or words in the photographs or videos that I provide in either television, radio, film, newspapers, magazines, social media and other media, and in any form, for the purpose of publicizing, promoting or communicating the purposes and activities of Special Olympics and/or applying for funds to support these purposes and activities.

I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, INDEMNITY, CONSENT TO USE OF PHOTOGRAPHS, AND PARENTAL CONSENT AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

\_\_\_\_\_  
Printed name of participant

\_\_\_\_\_  
Signature of Participant (only if age 18 or over)

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Legal Guardian  
(if participant under age 18)