



Event: _____

Date: _____

Event Waiver

Every participant (or guardian) must sign

I, the undersigned, accept full responsibility for myself and for any others in my group, for any injuries that I (we) may incur in this orienteering event. I fully understand that participating in this event may be dangerous to my (our) health. Sprained ankles and wrists, lacerations, bruises, broken bones, lightning strikes, animal bites, collisions with vehicles, hypothermia, and heat exhaustion are among the possible injuries a participant could suffer. I fully understand that there will be no medical or emergency personnel on the course or readily available. I will not hold any of the organizers, the Greater Phoenix Orienteering Club or its officers or directors, land owners, any agency of or within the state of Arizona, or any volunteers responsible. My actions and any mishaps or injuries to me or to anyone for whom I am signing as parent or guardian are solely my responsibility. In signing this waiver, I grant permission to the Greater Phoenix Orienteering Club to use any photographs, videos, or any other record of this event for any legitimate purpose.

The undersigned, if not already a member of Orienteering USA, is granted a one-time guest membership to Orienteering USA for the date(s) stated above. Please note that this membership does not entitle you to the entire list of benefits of an annual member.

#	Name (print) List names of each participant in group.	M/F	Age	Signature Parent/Guardian Signature if under 18
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