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| <i>For committee use only</i><br>Ticket No.: _____<br>Car No.: _____<br>Time out: _____ |
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**WAIVER AND RELEASE FROM LIABILITY**

In consideration of the acceptance of my entry for, and my participation in, **THE TREASURE HUNT** (the "Event") occurring in the year indicated within the signature block below, I for myself, my personal representative(s), heirs, and next of kin acknowledge, agree, and represent as follows:

I hereby agree to adhere to all instructions, rules, and regulations governing the Event, including without limitation all relevant documents posted by the **Treasure Hunt Committee** at [aztreasurehunt.org/docs](http://aztreasurehunt.org/docs). I am at least 18 years of age, and I agree to comply with all Federal, State, County, and Municipal laws, ordinances, and regulations while participating in the Event. For example, I hereby acknowledge my awareness of A.R.S. § 28-692 (non-use of alcohol while driving) and A.R.S. § 28-1253 (financial responsibility of vehicle ownership.)

I HEREBY RELEASE, WAIVE, AND FOREVER DISCHARGE ANY AND ALL LIABILITY, CLAIMS, AND DEMAND OF WHATEVER KIND OR NATURE AGAINST THE TREASURE HUNT COMMITTEE, THEIR MEMBERS, FAMILIES, SUCCESSORS, AND ASSIGNS (COLLECTIVELY, THE "RELEASEES"), EITHER IN LAW OR IN EQUITY, TO THE FULLEST EXTENT PERMISSIBLE BY LAW, INCLUDING BUT NOT LIMITED TO DAMAGES OR LOSSES CAUSED BY THE NEGLIGENCE, FAULT, OR CONDUCT OF ANY KIND ON THE PART OF RELEASEES, INCLUDING BUT NOT LIMITED TO DEATH, BODILY INJURY, ILLNESS, ECONOMIC LOSS, CONTRACTION OF DISEASE, OR LOSS OR DAMAGE TO PROPERTY, WHICH I, MY HEIRS, ASSIGNEES, NEXT OF KIN, AND/OR LEGALLY APPOINTED OR DESIGNATED REPRESENTATIVES, MAY HAVE OR WHICH MAY HEREAFTER ACCRUE ON MY BEHALF, WHICH ARISE OR MAY HEREAFTER ARISE FROM MY PARTICIPATION IN THE EVENT OR ANY FIRST AID, TREATMENT, OR SEVICE RENDERED IN CONNECTION WITH MY PARTICIPATION IN THE EVENT.

I acknowledge that participation in the Event involves many risks of injury, including, but not limited to, the inherent danger of operating a motor vehicle, and the inherent dangers found in the desert, such as cactus, snakes, scorpions, other dangerous insects and animals, rocks, washes, flash floods, broken glass, boards, nails, barbed wire, construction materials, and other such dangers often present at Event sites (including without limitation check-out, check-in, and clue sites). I HEREBY ASSUME FULL RESPONSIBILITY FOR THE RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE due to the negligence of Releasees or otherwise while in or upon the event site area and/or while competing, officiating, observing, working for, or any purpose participating in the Event.

I acknowledge that participation in the Event includes possible exposure to, and illness from, infectious diseases, including but not limited to COVID-19 (including its variants) from other participants, members of the Treasure Hunt Committee, and third parties encountered during the Event, and that the risk of serious illness and death exists by virtue of this exposure. Releasees cannot prevent me from being exposed to, contracting, or spreading COVID-19 during the Event. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS RELATED TO ILLNESS AND INFECTIOUS DISEASES, such as COVID-19, even if arising from the negligence or fault of Releasees.

I have read and voluntarily signed this Agreement, and further agree that no oral representations, statements, or inducements apart from the foregoing written Agreement have been made by the Treasure Hunt Committee or others associated with the Event. BY ATTENDING AND/OR PARTICIPATING IN THE EVENT, I HAVE GIVEN A FULL RELEASE OF LIABILITY TO THE FULLEST EXTENT PERMITTED BY LAW.

| NAME OF PARTICIPANT | SIGNATURE | DATE  |
|---------------------|-----------|-------|
| 1. _____            | _____     | _____ |
| 2. _____            | _____     | _____ |
| 3. _____            | _____     | _____ |
| 4. _____            | _____     | _____ |
| 5. _____            | _____     | _____ |
| 6. _____            | _____     | _____ |

VEHICLE DESCRIPTION: \_\_\_\_\_ VEHICLE LICENSE NO.: \_\_\_\_\_

DRIVER'S INSURANCE CARRIER: \_\_\_\_\_ POLICY NO. \_\_\_\_\_ POLICY EFF. DATES: \_\_\_\_\_