

OXLan -3- (2008) Liability Waiver

We, the undersigned, hereby release and forever discharge Exopyx LLC, OXLan -3- (2008), its administrators, sponsors, and all other persons, firms, corporations and educational institutions, who might be claimed to be liable, none of whom admit any liability from any and all claims, demands, actions, causes of action or suits of any kind or nature whatsoever and particularly on account of all injuries known and unknown, both to person and property, which have resulted or may in the future develop from any accident which might occur as a result of any social, educational, athletic, or any other event or activity sponsored by Exopyx LLC or OXLan -3- (2008). We, the undersigned, hereby declare that the terms of this settlement have been completely read and are fully understood and voluntarily accepted for the purpose of making a full and final compromise adjustment and settlement of any and all claims, stipulated or otherwise, on account of the injuries and damages above mentioned, and for the express purposes of precluding forever any further or additional claims arising out of any possibility accident by the undersigned.

It is further agreed that the release expresses a full and complete settlement of liability, regardless of the adequacy of the aforesaid and that the acceptance of this release shall not operate as an admission of the liability on the part of anyone, nor as an estoppel, waiver, or bar with respect to any claim the part or parties release may have against the undersigned.

This release is binding on all heirs, executors, assigns and administrators of the undersigned.

This is a voluntary release for any and all future injuries, accidents, and damage or theft of property. We, the undersigned, are aware of the risks of attending, traveling to, and participating in social, athletic, and all other events and hereby assume all risks. The risks include those foreseen and unforeseen, known and unknown.

I have read, fully understand, and agree to all of the above.

Participant Name (Print)

Player Name (Handle)

Participant Signature

Date

Parent or Legal Guardian Signature

Date

(Required if participant is under 18 as of 8/21/2008)

Emergency Contact Information (Required):

Name: _____

Address: _____

Phone: _____ Work/Cell: _____