

**RELEASE, WAIVER OF LIABILITY, ASSUMPTION OF RISK,  
IDEMNITY AND COVENANT NOT TO SUE AGREEMENT**

**PLEASE READ CAREFULLY**

**WARNING: BY SIGNING THIS, YOU GIVE UP THE RIGHT TO SUE**

Event/Program Playbook  
Event/Program Date(s) Saturday, February 29, 2020 Location: Rose Bowl Stadium  
Name of Participant \_\_\_\_\_

In consideration of the Rose Bowl, Rose Bowl Operating Company & the City of Pasadena granting me permission to use The Rose Bowl facilities and/or participate in the above event/program, the undersigned freely agrees to the following contractual terms and conditions:

**1. GOOD PHYSICAL CONDITION.** The participant has no physical or medical condition which would endanger the participant or others, or that would interfere with the participant's ability to participate in this event/program.

**2. ALL RISKS ASSUMED.** I am fully aware that serious injuries and possibly even death are sometimes associated with such events/programs, and with sporting and recreational activities. I fully realize the dangers and hazards associated with participating in this event and fully assume the risks associated with such participation, including, by way of example and not limitation, the following: dangers of falling; dangers of hitting (coming into physical contact) or being hit by other participants, spectators and fixed or moving objects; dangers arising from facility defects or surface hazards; equipment failure or lack thereof; inadequate safety equipment; and weather conditions. I accept responsibility to be familiar with the premises, the equipment, the improvements, the weather, and the rules and practices regulating the event/program. Knowing the risks and dangers, I nevertheless agree to assume, for myself a participant, all event/program risks and dangers (known and unknown, foreseen and unforeseen, and whether mentioned above or not).

**3. RELEASE, WAIVER, INDEMNITY, AND COVENANT NOT TO SUE.** I agree for myself a participant, and for our executors, administrators, heirs, next of kin, successors and assigns [collectively hereafter called "successors] to waive, release, discharge, agree not to sue, and agree to indemnify, hold harmless and defend, to the extent permitted by law, the City of Pasadena, Rose Bowl Operating Company and the Rose Bowl, its respective Directors, Commissioners, Officers, Employees, Volunteers and Agents (all referred to as Releases) from any and all liability, loss, suits, claims, damages, costs, judgments, and expenses (including attorney's fees and costs of litigation) which directly or indirectly result from or arise out of, or are alleged to result from or arise out of, participation or association with the event/program, including, but not limited to, personal injury (including death at any time) and property damage or other damage sustained by me or the participant or any person or persons whatsoever, from any cause whatsoever, whether caused by negligence or not. This release is intended to discharge Releases in advance from and against all liability arising out of or connected with my or my child's participation in

said program, even if that liability may arise out of negligence or carelessness on the part of Releases.

**4. MEDICAL AUTHORIZATION.** In the event the Rose Bowl Operating Company is unable to secure my consent in case of a medical emergency, I hereby give the Rose Bowl Operating Company and its representatives permission to secure proper medical care and assistance for myself, including, but not limited to, hospitalization, treatment, medication or x-rays. I further authorize any treating physician to use his or her discretion in providing emergency treatment. I agree to pay the costs of all such medical care.

**I HAVE READ THIS ENTIRE DOCUMENT. I UNDERSTAND IT IS A RELEASE OF ALL CLAIMS. I UNDERSTAND I ASSUME ALL RISKS OF INJURY INVOLVED IN THESE ACTIVITES AND VOLUNTARILY SIGN MY NAME FOR MYSELF.**

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**DATE**

**SIGNATURE**

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**PARENT SIGNATURE**

**PRINTED NAME**

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**PHONE NUMBER**

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**HOME ADDRESS**

**CITY ZIP**

**IN CASE OF EMERGENCY CONTACT:**

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**NAME**

**RELATIONSHIP**

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**PHONE NUMBER**