**Blue Devils Athletic Club**

**Running Program Liability Waiver & Informed Consent Form**

 "I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(participant’s first and last name), am enrolled in a specialized running program through Blue Devils Athletic Club. I recognize that the program may involve strenuous physical activity. I hereby affirm that I am in good physical condition and do not suffer from any known disability or condition which would prevent or limit my participation in the program." "In consideration of my participation in the running program I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(participant’s name), hereby release Blue Devils Athletic Club and its agents from any claims, demands, and causes of action as a result of my voluntary participation." "I fully understand that I may injure myself as a result of my participation in the program and I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby release Blue Devils Athletic Club and its agents from any liability now or in the future for conditions that I may obtain. These conditions may include, but are not limited to; heart attacks, muscle strains, muscle pulls, muscle tears, broken bones, shin splints, heat prostration, injuries to the knee, the back, to the foot or soreness that I may incur including death."
I HAVE READ AND FULLY UNDERSTAND THE ABOVE STATEMENTS.

Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Photo Release Waiver**

I hereby grant permission to the Blue Devils Athletic Club, and its officers, (hereinafter “Blue Devils") to photograph or video my image. I hereby grant permission to the Blue Devils to edit, crop, or retouch such photographs or videos, and waive any right to inspect the final photographs. I hereby consent to and permit photographs of me to be used by the Blue Devils worldwide for any purpose, including educational and advertisement purposes, and in any medium, including print and electronic. I understand that the Blue Devils may use such photographs with or without associating names thereto. I further waive any claim for compensation of any kind for the Blue Devils’ use or publication of photographs of myself (if applicable). I acknowledge and represent that I am over the age of 18, have read this entire document, that I understand its terms and provisions, and that I have signed it knowingly and voluntarily.

I HAVE READ AND FULLY UNDERSTAND THE ABOVE STATEMENTS.

Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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