

Student Waiver and Liability Release Form

In consideration of the City of Columbus, TCI EXPO, the Greater Columbus Convention Center, Tree Care Industry Association Foundation (hereinafter "TCIAF"), TCIA PACT Program Partners (hereinafter "PACT Partners"), and the Tree Care Industry Association, Inc. (hereinafter "TCIA") organizing and furnishing a facility, services, and/or equipment to enable me to participate in an educational arborist skills competition (hereinafter "event") arranged in whole or part by TCIA/TCI EXPO/TCIAF/PACT Partners, I agree as follows:

I fully understand and acknowledge that the event to take place has: (a) inherent risks, dangers, and hazards and such exists in participation such activities; (b) my participation in such activities and/or use of any equipment may result in injury or illness including, but not limited to bodily injury, disease, strains, fractures, partial and/or total paralysis, death or other ailments that could cause serious disability; (c) these risks and dangers may be caused by the negligence of the owners, employees, officers, or agents of the above listed facility/business/property; the negligence of the participants, the negligence of others, accidents, breaches of contract, the forces of nature or other causes. Risks and dangers may arise from foreseeable or unforeseeable causes including but not limited to, fires, explosions, slips, falls, and all other dangers associated with the demonstration listed above, and (d) by my participation in these activities and use of equipment, I hereby assume all risks and dangers and all responsibility for any losses and/or damages, whether caused in whole or in part by the negligence or other conduct of the owners, agents, officers, or employees of facility/business/property owner, or by any other person.

I, on behalf of myself, my personal representatives and my heirs hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify the above-listed facility/business/property owner, their agents, officers, and employees, and any agents, officers, and employees of from any and all claims, actions, or losses for bodily injury, property damage, wrongful death, loss of services or otherwise which may arise out of my participation in the above-listed event or use of equipment or any other outdoor activities at the above listed location. I specifically understand that I am releasing, discharging and waiving any claims or actions that I may have presently or in the future for the negligent acts or other conduct by the above-listed facility/business/property owner, their agents, officers, and employees, and any agents, officers, and employees of TCIA/TCI EXPO/TCIAF/PACT Partners.

I also agree to the following: the undersigned acknowledges that he/she is aware of the risks and hazards involved in participating in the above-listed activity as well as any associated use of equipment, chemicals, gases, or other materials associated with the activity including, but not limited to, ingress and egress at the facility, walking, climbing stairs, and lifting. I voluntarily participate therein although knowing such dangers and hereby release the above-listed facility/business/property owner, their agents, officers, and employees, and any agents, officers, and employees of against any and all liabilities, claims, demands, actions and causes of action whatsoever, arising out of or relating to any loss, damage, including death, that may be sustained by me in connection with my participation in this activity. This release shall be binding upon the administrators and/or executors of my estate, my heirs, and distributees. The venue of any dispute that may arise out of this agreement, or otherwise between the parties shall be in either the county/parish of the above-listed facility or if TCIA/TCI EXPO/TCIAF/PACT Partners is a named party, in the state or superior court of Hillsborough County, New Hampshire.

I have read the above waiver and liability release and by signing it agree it is my intention to exempt and relieve the above-listed facility/business/property owner, their agents, officers, and employees, and any agents, officers, and employees of TCIA/TCI EXPO/TCIAF/PACT Partners from liability for personal injury, property damage, or wrongful death caused by negligence or any other cause.

This _____ day of _____, 2017
(day) (month)

Participant (please print name) _____

Participant Signature _____ Age _____

If the participant is under the age of 18, the participant's parent or legal guardian must also sign this release.

Parent or Legal Guardian's Signature _____

Printed Name of Parent or Legal Guardian _____

EACH student competing in a skills event MUST complete and return this form by October 20, 2017; otherwise, s/he will not be allowed to compete or receive the student travel reimbursement.

Please fax or email the completed form with the registration information to Mai Chen at TCIA:

Fax: 1.603.314.5386

Email: mchen@tcia.org