

## **Agreement and Release from Liability and Waiver**

## Assumption of Risk

- 1. I acknowledge that I have voluntarily agreed to participate in the Tofino Saltwater Classic 2024.
- 2. I am aware that sport fishing and activities involving motorized boats may be hazardous. I am voluntarily participating in these activities with knowledge of the danger involved, and I agree to accept any and all risk of injury or death.

## Release of Liability

- In consideration for being permitted to participate in the Tofino Saltwater Classic 2024 fishing derby by the event's Organizing Committee, I hereby release the host, Tofino Saltwater Classic 2024 Organizing Committee, its owners, agents, employees, sponsors, tournament officials, and the suppliers of any of the equipment I might use in this activity from any and all damages, claims, demands, cost, or expenses relating to injury of any persons or damage to any property which I may sustain or which I may cause, by negligence or other acts by reason of participating in or in connection with the Tofino Saltwater Classic 2024.
- 2. I further agree that I, my assignees, heirs, distributees, guardians and legal representatives will never sue any of the above for damages on account of any injury or damage I suffer or cause, whether known now or which may develop in the future, in connection with the Tofino Saltwater Classic 2024 fishing derby. In the event any of the above are sued because of my actions, I, my assignees, heirs, distributees, guardians and legal representatives expressly agree to indemnify and hold each harmless from any liability whatsoever, including court cost and attorney fees arising with respect to such actions.

## Knowing and Voluntary Execution, Form Submission

By signing below, I acknowledge that I have carefully read this agreement and fully understand its contents. I am aware that this is a release of liability and a contract between myself and the Tofino Saltwater Classic 2024 Organizing Committee and/or its affiliated organizations, dealers and sales agents and sign of my own free will.

Printed Name:	Signature:	Date:
Signature of Guardian if Under 18 years of age:		
E-Mail:	Phone:	