

WORLD WAR II HISTORICAL RE-ENACTMENT SOCIETY, INC.

**WAIVER OF LIABILITY, RELEASE
ASSUMPTION OF RISK & INDEMNITY AGREEMENT
FOR
NON-MEMBERS OF THE SOCIETY**

The below named individual understands that he/she is not a current member of the World War II Historical Re-Enactment Society, Inc. (WWII HRS), and he/she have declined membership although it has been offered, and fully realize and are aware that the current liability insurance coverage afforded WWII HRS members does not and will not cover them or their actions, willful or accidental, at this event.

It is the purpose of this agreement to exempt, waive and relieve the WWII HRS, its officers and directors, event hosts, other participants, sponsors, if any, and the owners of the property where this event is being held (Releasees) from liability for personal injury, property damage, and wrongful death, including if caused by negligence, including the negligence, if any, of Releasees.

For and in consideration of the undersigned Non-WWII HRS-member participant's registration to participate in the WWII HRS sponsored re-enactment event being held on _____ at (place) _____ in _____, _____ the participant, and parents(s) or legal guardian(s) or Unit Commander, if participant is under the age of 18, hereby waive, release and relinquish any and all claims for liability and cause(s) of action, including for personal injury to themselves or others, property damage of any kind or wrongful death occurring to participant or spectator, if such casualty is caused by the below-named event participant, arising out of participation in this WWII HRS sponsored re-enactment event, and/or activities incidental hereto, whenever or however they occur and for such period said activities continue, and by this agreement any such claims, rights, and causes of action that participant may have are hereby waived, released and relinquished, and participant does so on behalf of participant's heirs, executors, administrators and assigns.

Participant, and parent(s) or legal guardian(s), or Unit Commander, if participant is under the age of 18, acknowledge, understand and assume all risks relating to World War II re-enacting, and understand that World War II re-enacting involves risks to participant's person including bodily injury, partial or total disability, paralysis and death, and damages which may arise therefore and that I have full knowledge of said risks. These risks and dangers may be caused by the negligence of the participant or the negligence of others, including the Releasees identified in this document. I agree to abide by and be bound under the By-Laws and Safety & Authenticity Rules of the WWII HRS and any and all rules and regulations that may be set forth by other hosts of the re-enactment event.

Participant, and parent(s) or legal guardian(s), or Unit Commander, if participant if under the age of 18, acknowledge that he/she has been provided and have read the above paragraphs and have not relied upon any representations of Releasees, that they are fully advised of the potential dangers of World War II re-enacting, understand these waivers and releases are necessary to allow World War II re-enacting to exist in its present form.

PLEASE PRINT ALL INFORMATION

Name _____ Phone number _____

Address _____ Date of Birth: _____

City/State/Zip _____ Unit/Society _____

In case of emergency, please contact _____ at (_____) _____

Participant
Signature _____ Date _____

Parent, Guardian, or Unit Commander's Signature
(if participant in under the age of 18): _____