MARCH OF DIMES FOUNDATION
PARENT/GUARDIAN WAIVER and CONSENT for CHILD PARTICIPANT UNDER THE AGE OF 18

Superhero Sprint is a kids "fun run" that puts the March of Dimes "mission in motion". Open to children aged (approx.) 1 to 10 years old, and especially NICU graduates! For a suggested donation of $20 per child or $30 per family, Superhero Sprint participants will receive a purple March of Dimes cape, and the opportunity to run in the Superhero Sprint!

Description of Event: March for Babies® Superhero Sprint Event
Place of Event: Cannon Park, Charleston, SC
Date of Event: April 29, 2017
Time of Event: 8 a.m. to noon

I _____, in consideration of my child's participation in the Event described above ("Event"), do hereby waive, release and discharge the March of Dimes Foundation ("Foundation"), its officers, directors, employees, agents, volunteers and insurers, and their respective heirs, successors and assigns, and all other persons associated with the Event, including the City of Charleston, any sponsors of the Event, and rescue or medical personnel, and all their employees, volunteers, representatives and successors from any claims, actions, suits, judgments, or damages which may arise at law or in equity against said parties, for any and all injury, death, or loss, my child may suffer as a consequence of his/her participation in the Event, which against said parties, my child or I, our respective heirs, assigns and successors, individually or collectively now have or hereafter can, shall or may have.

I represent that my child has no mental or physical condition that will be jeopardized or will place my child or others at risk on account of his/her participation in the Event and that he/she is properly trained and medically able to run the race. I accept and assume all risks associated with my child's participation in the Event, including without limitation risks in connection with the effects of weather, such as high heat and humidity or extreme cold, traffic and conditions of the road, risks to his/her health and well-being and all such other risks associated child's participation in the Event. I agree to abide by any and all decisions of race officials in connection with my with the Event. I accept and assume full responsibility for any risk of injury, death or loss suffered by my child on account of his/her participation in the Event.

I grant permission to March of Dimes Foundation to use any photographs, motion pictures, recordings or other record of this Event for any legitimate purpose, without compensation.

I represent and warrant that I am the Parent and/or Guardian of the child named above, with authority to sign this Waiver and Consent on his/her behalf. I have read and fully understand the terms of this Waiver and Consent, and I understand that I am giving up substantial rights, including the right to sue the March of Dimes Foundation and all other parties identified under this Waiver and Consent. I hereby provide a complete and unconditional release of all liability to the greatest extent allowed by law.

TEAM NAME: _____ DONATION: $_____

- Cash
- Credit Card _____

PARTICIPANT CHILD'S NAME: _____

PARENT/GUARDIAN SIGNATURE: _____

HOME ADDRESS: _____

PHONE NO.: (____) _____ EMAIL ADDRESS: _____

DATED: _____, 2017

MARCH OF DIMES WITNESS: _____ DATED: _____, 2017