

Wichita Wagonmasters Chili Cookoff Pepper Eating Contest

First Name: _____

Last Name: _____

Address: _____

Phone: _____

Email: _____ Age: _____

Waiver and Release

I, the undersigned, know that the above listed event is a potentially hazardous activity, and I attend and participate in it of my own free will and choice. In choosing to participate in the Wichita Wagonmasters Chili Cookoff Pepper Eating Contest and any related activities, I fully accept and assume all risks that may occur before, during, or after this contest and its related events. I accept this specific notice of the existence of the risks. I shall assume and pay my own medical and emergency expenses in the event of injury, illness, death, or other incapacity regardless of whether I authorized such expenses. I realize that this activity requires physical conditioning and I represent that I am in sound medical condition capable of participating in the contest without risks to myself or others. I have no medical impediment which would endanger others or myself. Knowing these facts and in consideration of my entry acceptance, admission to and/or participation in the Wichita Wagonmasters Chili Cookoff Pepper Eating Contest and its related events, I for myself and anyone acting on my behalf, release, waive, discharge, covenant not to sue and agree to hold Wichita Wagonmasters or any sponsors, emergency and support personnel, volunteers and their representatives harmless from any and all claims, demands and actions of any and every kind I have, may have or may hereafter accrue against the released parties directly or indirectly arising out of or relating in any respect to my attending or participating in the Wichita Wagonmasters Chili Cookoff Pepper Eating Contest and its related events. I am eighteen years of age or older and agree to be bound by the terms of this agreement, waiver, and release. I understand that at this event or related activities that I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and/or assigns.

I HAVE READ THIS AGREEMENT, WAIVER AND RELEASE, AND AGREE TO ACCEPT ITS TERMS.

Printed Name

Date Signed

Participant Signature