



Teton Valley Trails and Pathways  
14<sup>th</sup> Annual Horseshoe Challenge  
September 21<sup>st</sup>, 2019



**ACKNOWLEDGEMENT OF RISK, RELEASE OF LIABILITY, & COVENANT NOT TO SUE**

I \_\_\_\_\_ recognize that there is an element of risk in any adventure, sport, or activity associated with the outdoors. I understand that **TVTAP** is not responsible for the conditions of the trails because the **Horseshoe Challenge** is a strenuous footrace race over remote public lands under the jurisdiction of the U.S. Forest Service. I am fully cognizant of the risks and dangers inherent in **Horseshoe Challenge** and I knowingly assume all risks associated with running in this event, including but not limited to falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic, wildlife, insects, trees, and the conditions of the road. As a steep and challenging footrace over rugged terrain, all of these risks are known and appreciated by me.

**CERTIFICATION OF GOOD HEALTH:** By my signature below, I certify that my family and I, including minor children, are fully capable and medically able to participate in the **Horseshoe Challenge**. I agree that it is my sole responsibility to determine whether I am sufficiently fit and healthy enough to participate in the **Horseshoe Challenge**, an extremely difficult race over rough and wild terrain. I further certify that I am responsible for my own safety and wellbeing at all times and under all circumstances before, during, and after the **Horseshoe Challenge**.

**PERSONAL ASSUMPTION OF RESPONSIBILITY:** I assume full responsibility for personal injury to myself and/or to members of my family, or for loss or damage to my personal property and expenses thereof as a result of my negligence or the negligence of my family participating in said activity.

**CONSENT TO FIRST AID:** I, on behalf of myself, and/or my minor children consent to administration of first aid and other medical treatment and related services, including evacuation and/or transport, in the event of injury or illness in connection with participation in the **Horseshoe Challenge** and hereby release and indemnify **TVTAP** from any and all liability or claims arising out of such treatment and/or services.

**SEVERABILITY:** If any of the provisions of this Acknowledgement of Risk, Release of Liability, & Covenant Not To Sue shall be deemed by a court of competent jurisdiction to be invalid or unenforceable in any respect, then, to the fullest extent permitted by applicable law, all other provisions hereof shall remain in full force and effect.

Participant: \_\_\_\_\_ Minor Children: \_\_\_\_\_

I have read, understand, and accept the terms and conditions stated herein and acknowledge that this agreement shall be effective and binding upon the parties during the entire period of participation of the **Horseshoe Challenge**.

Parent/Guardian Signature(s) \_\_\_\_\_

Participant Signature \_\_\_\_\_ Date: \_\_\_\_\_