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## **2026 Transplant Games Waiver and Release of Liability**

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In consideration of being allowed to participate in any way in the Transplant Games of America athletic / sports program, related events and activities, I acknowledge, appreciate, and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I knowingly and freely assume all such risks, both known and unknown, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from the participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, Hereby release and hold harmless Transplant Games of America, Transplant Life Foundation, TransplantNATION Magazine, Drive for Five, Games Delivery Team, Colorado Convention Center, and each of their officers, officials, agents and employees, as well as other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releasees"). With respect to any and all injury, disability, death, or loss or damage to person or property.

### **FOR ADULT PARTICIPANTS:**

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I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by accepting it, and accept it freely and voluntarily without any inducement.

### **FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)**

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This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above to the fullest extent permitted by law.



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## **AUTHORIZATION FOR THE USE OF PERSONAL IMAGE**

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1. By accepting, I hereby authorize the Transplant Games of America, Transplant Life Foundation, TransplantNATION Magazine, Drive for Five, Games Delivery Team, Colorado Convention Center, and each of their respective employees, agents, affiliates, and sponsors, an unlimited right to make, take, use, create, re-create, modify, record, transmit, preserve, produce, or reproduce and publish, exhibit, televise, display, or otherwise make available to others, images, or likenesses of my face, body, and/or voice by any means including without limitation photograph, video, digital imagery, or other media not yet named or developed in any Transplant Games of America, Transplant Life Foundation, TransplantNATION Magazine, Drive for Five, Games Delivery Team, Colorado Convention Center, or any sponsor related book, magazine, journal, publication, exhibit, newspaper, website, poster, advertisement, television spot, billboard, or other communications format.
2. Transplant Life Foundation and Transplant Games of America, affiliates, and sponsor rights with respect to this Authorization will continue until this Authorization is terminated in writing by me.
3. I understand that the purpose of this Authorization and the use of my personal image may include all or any of the following:
  - To generate coverage in print, electronic, and other media formats.
  - To inform the general public (including the media) about the Transplant Games of America, organ and tissue donation, affiliate and sponsor-related events or services; and
  - For purposes of promoting the Transplant Life Foundation, Transplant Games of America, and TransplantNATION Magazine.
4. I understand that I may refuse to sign this Authorization.
5. I understand that I have the right to revoke this Authorization, if the revocation is in writing, except if the Transplant Life Foundation and Transplant Games of America, affiliates, or any sponsors have taken action in reliance upon this authorization.
6. I understand that in order to revoke this Authorization, I must submit a request in writing to: Transplant Life Foundation, 1593 Galbraith Ave. SE, Suite 201, Grand Rapids, MI 49546.
7. I understand that if my personal image is used or disclosed pursuant to this Authorization that it may also be subject to re-use and re-disclosure by the party or media outlet receiving the information, and such use or disclosure will not be protected by the law.
8. By registering for the Transplant Games of America, you give implied permission to receive the Transplant Life Foundation/Transplant Games newsletter.

By accepting this Authorization, I acknowledge that I have read, and understand this Authorization. Further, I authorize the use or disclosure of my personal image in accordance with the terms of this Authorization.