

Liability Waiver and Release Form for the 2025 Buffalo Shamrock Race and Bus Trip

I, _____ hereby waive and release, promise to hold harmless and ceaselessly discharge Trevor Brown of and from any and all claims, demands, causes of action or injury, lawsuits, damages, and liabilities, of all natures, whether it is known or unknown, in law or in equity, that I may have or ever have in the future while participating in any activities or any other functions associated with the parties aforementioned in this agreement. I understand that serious injuries, damage to personal property, and many other circumstances could occur while on the bus trip to 62 Republic St, Buffalo, NY 14204 on March 1, 2025. On behalf of myself, my family, and representation, I waive all claims for damages done to myself or my property whether the incident is caused by an ordinary negligence of the released parties mentioned or otherwise. By signing this waiver I take full responsibility and waive all claims of personal injury, death, and damage to personal property while participating in any activities or functions associated with the 2025 Buffalo Shamrock Race and Bus Trip.

I agree to behave in a professional and respectful manner during the bus ride. Any disruptive behavior will not be tolerated. If my behavior is harmful to other participants, I understand that I may be removed from the bus. In case I am removed from the bus, I acknowledge that I will be responsible for my transportation home.

I acknowledge and agree to be on time and on board for when the bus is scheduled to depart. Should I be unable to arrive on time, I agree that I shall be liable for all costs that I incur.

I acknowledge that this event is privately organized and is in no way represented by or insured by Brew Crew Run Club or St. Catharines Runners and Walkers.

By signing this waiver I also guarantee that I am 18 years of age or older and am therefore competent in agreeing to this contract.

Please Print Your Name: _____

Signature: _____

Date: _____

In the case of an emergency please leave the contact information of whom we may contact below:

Name: _____ Phone: _____

Address: _____