

**METRO FOUNDATION
METRO FEST
FUN RUN AND ROLL
PARTICIPANT WAIVER/RELEASE**

Event Date: October 3, 2026
Location: 901 McClintock Drive, Burr Ridge, IL

PLEASE READ CAREFULLY. THIS DOCUMENT AFFECTS LEGAL RIGHTS.

1. Participant Information

Participant Name: _____
Address: _____
Phone: _____
Email: _____

Emergency Contact: _____
Emergency Contact Phone: _____

2. Voluntary Participation and Assumption of Risk

I voluntarily choose to participate in the Metro Foundation Metro Fest Fun Run And Roll (the Event). I understand that running, walking, spectating in designated participant areas, and related event activities involve inherent and other risks, including but not limited to falls; uneven surfaces; wet or slippery surfaces; road, parking lot, sidewalk, trail, and property conditions; weather; heat; cold; rain; lightning; interaction with other participants, volunteers, spectators, animals, bicycles, and vehicles; dehydration; overexertion; cardiac events; illnesses; equipment failure; and serious bodily injury, disability, or death. I knowingly and freely assume all risks, both known and unknown.

3. Release and Covenant Not to Sue

In consideration of being permitted to participate, I release, waive, discharge, and covenant not to sue Metro Foundation, Metro Infectious Disease Consultants, Innovative Ventures and its current and former directors, officers, employees, volunteers, agents, representatives, sponsors, donors, vendors, contractors, event organizers, affiliates, successors, assigns, and the owners, tenants, occupants, and managers of the event premises (collectively, Released Parties) from any and all claims, demands, causes of action, damages, losses, liabilities, judgments, costs, and expenses arising out of or related to my participation in the Event, including claims arising from the ordinary negligence of any Released Party, to the fullest extent permitted by Illinois law.

4. Indemnification and Hold Harmless

I agree to defend, indemnify, and hold harmless the Released Parties from and against any claim, demand, action, liability, loss, damage, cost, or expense, including reasonable attorneys fees, arising out of my participation in the Event, my conduct, or any claim brought by or on behalf of me, my estate, family members, or anyone claiming through me.

5. Health Representation and Medical Care

I represent that I am physically capable of participating and have not been advised otherwise by a healthcare provider. I consent to emergency medical evaluation and treatment if deemed necessary. I understand that the Released Parties are under no duty to provide medical care and that I am solely responsible for all medical expenses incurred.

6. Compliance With Event Rules

I agree to follow all event rules, safety requirements, and instructions. I understand that Metro Foundation may deny or revoke participation if my conduct creates a safety risk or otherwise interferes with the Event.

7. Media Release

I grant permission to the released parties to use my name, image, likeness, and voice in any media for charitable, fundraising, promotional, educational, advertising, or related purposes without compensation or additional approval.

8. Severability and Governing Law

If any provision is held unenforceable, the remaining provisions shall remain in full force and effect. This Agreement shall be governed by Illinois law, without regard to conflict-of-law principles.

9. Entire Agreement and Acknowledgment

I acknowledge that this document is intended to be as broad and inclusive as permitted by law. I have carefully read this Agreement, understand its terms, understand that I am releasing significant legal rights, and sign it knowingly and voluntarily.

Participant Signature: _____

Printed Name: _____

Date: _____

Parent/Guardian Consent, Release, and Indemnification for Minor Participants

The undersigned is the parent or legal guardian of the minor participant identified below and authorizes the minor to participate in the Event. I have read this Agreement, understand its terms, and agree to all provisions on behalf of the minor and myself. I assume all risks on behalf of the minor, release the Released Parties to the fullest extent permitted by law, and agree to defend, indemnify, and hold harmless the Released Parties from claims arising out of or relating to the minor's participation in the Event.

Minor Participant: _____

Parent/Guardian: _____

Relationship to Minor: _____

Parent/Guardian Signature: _____

Date: _____

Emergency Phone: _____