Please make checks payable to:

Claremore Main Street, Inc.

412 W. Will Rogers Blvd.

Claremore, OK 74017

I fully realize the risks associated with participating in Claremore Main Street’s Corporate Olympics and fully assume the risk associated with such participation. I for myself, my heirs, executors, administrators and assigns, forever release and discharge any and all rights, demands, claims for damages and causes of suit or action known or unknown, that I may have against Claremore Main Street, Inc., Corporate Olympics committee members, City of Claremore and any and all participating rally supporters and sponsors and the directors, officers, employees and agents of such parties for any and all injuries in any manner arising or resulting from my participation in said event. I will assume and pay my medical and emergency expenses in the event of an accident, illness or other incapacity regardless of whether I have authorized such expenses. I am physically fit and sufficiently trained to participate in these events. I release the right to any and all photographic material and registration and computer information the Corporate Olympics may wish to release for this event without obligation to me.

PARTICIPANTS NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_