PUBLICITY RELEASE, ASSUMPTION OF RISK, WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

Address:	Participant (please print):			
City:				
E-Mail: I, the above-named person, in consideration for my participation in post game activities with Reverb at Berglund Center, put or by Word of Life, located at 710 Williamson Road, NE, Roanoke, VA, promise and covenant and hold harmless the City of Roanoke, Berglund Center, the Berglund Center Commission, subsidiaries, affiliates, subcontractors, promoters, sponsors, advertisers, owners, staff, volunteers, and lessees of the premises. In Interest y voluntarily release, and forever agree to allow Breakway Sports and Entertainment, LLC, Berglund Center, the City of Roanoke, employees, affiliates, subcontractors, geents, volunteers, Berglund Center Commission, and related entities, to use as they set fit, any and all photographic material and/or audio or audio-video material, including images therefrom, in any manner that Breaky Sports and Entertainment, LLC deems suitable for the marketing and promotions of the organization, venue and Reverb. I fully understand that this may include, but not be limited to, the use of said material in they entity in the production and distribution of sanctioned videos, news programs, television programs, and documentaries. **ACKNOWLEDGEMENT OF RISKS** 2. Lunderstand and acknowledge that the activity I am about to voluntarily engage in, as a participant and/or volunteer, bears certain known risks and unanticipated risks which could result in injury, death, illness or disease, physical or mental, or damage to myself or my property. Among these risks are the following: (1) the nature of Reverb (Any on ice games, off ice games, any other post-game activities) itself: (2) latent or apparent defects or conditions in equipment; (3) use or operation, by myself or others, of equipment supplied by Reverb, Berglund Center, Breakaway Sports and Entertiamment, LLC, or other persons or entities; (5) weather conditions; (6) myoun physical condition, or my own acts or omissions; (7) first-aid, emergency treatment, rescue, medical transport or other sevices rendered; (8) consumption of fo				
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	PARTICIPANT SIGNATURE (Must be signed by Parer	nt or Guardian for particip	oants age 12 & under	-):

PRINT NAME: ______ TODAY'S DATE: _____