



DALLAS – FORT WORTH INTERNATIONAL AIRPORT

SPECIAL EVENT LIABILITY WAIVER

I, _____ [printed name], represent that I am 18 years of age or older as of the date of my signature below.

I hereby request to participate in the 2017 Aviation and Transportation Career Expo (“Event”) being held at Dallas – Fort Worth International Airport and CR Smith Museum and agree as follows:

I give the Dallas – Fort Worth International Airport Board (“DFW”) the right to use video or still shot photography images of myself for publicity use, which may include posting of photos/video of the Event on DFW Airport internal or external media sources.

I understand that I am and remain legally responsible for my personal actions. I accept and assume all risk of and responsibility for personal injury or death to, or damage to or loss of property of, myself arising from, based upon, or relating to my participation in the Event. I understand and agree that DFW will not be held responsible for any decision relating to my medical treatment, or for any actual treatment provided, should I become ill or be injured in any way while participating in the Event. I hereby provide consent to be treated by first aid or emergency medical treatment in the event of sudden illness or injury while participating in the EVENT. In the event of such sudden illness or injury, I understand that the cost of such treatment will be at my sole expense.

In consideration for my participation in the Event, I expressly hold harmless from and waive against DFW, the City of Dallas, Texas, the City of Fort Worth, Texas, their board and council members, officers, employees, agents, and assigns, any and all claims for medical expenses, loss of services, injury to person or property, death, or other claims, actions, or liabilities made against it or them on my behalf, regardless of the cause of such claims, actions, or liabilities or any concurrent or contributing fault or negligence of it or them as such may result from my participation in the Event.

In further consideration for my participation in the Event, I also agree to indemnify and hold harmless DFW, the City of Dallas, Texas, the City of Fort Worth, Texas, their board and council members, officers, employees, agents, and assigns, from and against any and all claims, suits, actions, losses, damages, or that which that may result from my participation in the Event.

I certify that I have read this document or have had it read to me and that I sign it voluntarily and with full knowledge of its significance.

Participant’s Signature: _____ Date: _____

Printed Name of Participant’s School: _____