OFFICIAL USE ONLY	FORM: KIRA-2	Race #	
-------------------	--------------	--------	--

KANAKA IKAIKA RACING ASSOCIATION



Moku Manu Hoe Wa'a

PARTICIPANTS AGREEMENT, RELEASE AND ASSUMPTION OF RISK

In consideration of the services of Kanaka Ikaika Racing Association, their agents, owners, officers, volunteers, participants, employees, members and guests of members and all other persons or entities acting in any capacity on their behalf (hereinafter referred to as Kanaka Ikaika), I hereby agree to release, indemnify, and discharge Kanaka Ikaika on behalf of myself, my children, my parents, my heirs, assigns, personal representative successors and assign, for any and all damages which I may sustain or suffer in connection with my entry or participation in the event or arising out of my travel to and return from the event, and I do hereby indemnify and hold them harmless from and against any claim for damages asserted by or on behalf of any person assisting me or riding in a boat escorting me during or in connection with the event. I also agree to accept and abide by the rules and regulations of Kanaka Ikaika, and estate as follows:

- 1. I risk bodily injury, including paralysis, dismemberment, and death, as well as loss of or damage to property.
- 2. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.
- 3. I realize that the decision to hold a race does not mean that water conditions are safe for all paddlers. I will assess the water conditions and make my own decision regarding race participation.
- 4. I also certify that I can swim and that my paddle craft is seaworthy.
- 5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I am willing to assume the risk of any medical or physical condition I may have.

By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law have waived my right to maintain a law suit against Kanaka Ikaika, on the basis of any claim from which I have released them herein. I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.

I GIVE PERMISSION for the free use of my name, voice or picture in any broadcast, telecast, advertising promotion or other account of this event.

PARTICIPANT INFORMATION

. ,	,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Print Participants Name:						
Street Address:		City		State	Zip	
Email:		Phone:				
Age on Race Day:		Gender: Male	Female			
By signing this document, I ack may be found by a court of lav of any claim from which I have and understood it, and I agree	v have waived my released them he	right to maintain a law suit ag erein. I have had sufficient opp	ainst Kanaka Ikaika R	acing Associat	tion, on the basis	
Signature of Participant:				Date:		
(Parent's or guardian must s						
Signature of Parent or Guardian:				_ Date:		
EMERGENCY CONTACT IN	IFORMATION					
Emergency Contact Name: _		Emerg	ency Contact Phone	2:		
Canoe Club/Team Name: _						
OFFICIAL USE ONLY DATE REC	EIVED:	PAID BY:	APPROVED BY:			