

Signed Waivers

Participant Information

Name: Jaime Salazar
Email: jaime281@gmail.com
Address: 6230 SE 48th Ave, Portland, Oregon, 97206, United States
Confirmation Number: w0zHY

Event Information

Event Name: Bend Dirt Fest
Event Date: July 12, 2025
Event Location: Bend, Oregon, United States
Sub-Event: Bend Dirt Fest: 2-person Trail Run/Gravel Grinder/MTB Race

Signed Waiver Terms

Movemint Waiver

In consideration of you accepting this entry, I, the participant, intending to be legally bound do hereby waive and forever release any and all rights and claims for damages or injuries that I may have against the Event Director, Movemint, and all of their agents assisting with the event, sponsors and their representatives, volunteers and employees for any and all injuries to me or my personal property. This release includes all injuries and/or damages suffered by me before, during or after the event. I recognize, intend and understand that this release is binding on my heirs, executors, administrators, or assignees.

I know that participating in an event is a potentially hazardous activity. I should not enter unless I am medically able to do so and properly trained. I assume all risks associated with participating in this event including, but not limited to: falls, contact with other participants, the effects of weather, traffic, and course conditions, and waive any and all claims which I might have based on any of those and other risks typically found in participating in this type of event. I acknowledge all such risks are known and understood by me. I agree to abide by all decisions of any race official relative to my ability to safely complete the event. I certify as a material condition to my being permitted to enter this race that I am physically fit and sufficiently trained for the completion of this event and that a licensed Medical Doctor has verified my physical condition.

In the event of an illness, injury or medical emergency arising during the event I hereby authorize and give my consent to the Event Director to secure from any accredited hospital, clinic and/ or physician any treatment deemed necessary for my immediate care. I agree that I will be fully responsible for payment of any and all medical services and treatment rendered to me including but not limited to medical transport, medications, treatment and hospitalization.

As it applies to my participation in this race, I agree to abide by the Center for Disease Control (CDC)'s recommendations for the prevention of the spread of COVID-19 and attest to having read the CDC's guidance at:

<https://www.cdc.gov/>. I also agree to abide by any COVID-19 distancing and other safety guidelines issued by the state, the community or by this race for my participation in this race.

Further, I grant permission to all the foregoing to use my name, voice and images of myself in any photographs, motion pictures, results, publications or any other print, videographic or electronic recording of this event for legitimate purposes.

This event follows the standard athletic event industry policy: All entry fees are non-refundable. We reserve the right to postpone or cancel the event due to circumstances beyond our control such as a natural disaster or emergency or as required to protect the safety of participants and staff. No refunds will be issued under these circumstances. We reserve the right to change the details of the event without prior notice. I understand that my entry fee is nonrefundable and bib numbers are non transferable.

By submitting this entry, I acknowledge (or a parent or adult guardian for all children under 18 years) having read and agreed to the above release and waiver including the no refund policy.

Signature Confirmation

Participant Name: Jaime Salazar
Waiver: Movemint Waiver
Date Signed: April 05, 2025 at 12:58 AM UTC

Event Waiver

OREGON BICYCLE RACING ASSOCIATION, 320 SW Century Dr. Ste 405-396, Bend, OR 97702 ACCIDENT WAIVER AND RELEASE OF LIABILITY

1. I acknowledge that this athletic Event ("Event") is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury, and property loss. I assume these risks. The risks include, but are not limited to, those caused by accidents, terrain, facilities, temperature, weather, condition of athletes, equipment, condition of others' equipment, vehicular traffic, illness, actions of other people including, but not limited to, participants, volunteers, spectators, coaches, Event officials, and Event monitors, and/or producers of the Event, and lack of nutrition, hydration, and fitness. These risks are not only inherent to athletics, but are also present for volunteers. I hereby assume all of the risks of participating and/or volunteering in the Event. I realize that liability may arise from negligence, recklessness, or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained or controlled by them or because of their possible liability without fault.
2. I certify that I am physically fit and health and have sufficiently trained to be a participant in the Event and have not been advised otherwise by a qualified medical person.
3. I acknowledge that this Accident Waiver and Release of Liability ("AWRL") form will be used by and relied upon by Event holders, sponsors and organizers, in any and all Events in which I may participate and that it will govern my actions and responsibilities at any Events.
4. I understand that I am choosing to participate in the Event and I have the option to not participate in the Event. In consideration of my application and permitting me to participate in the Event, and all activities related to or connected with this Event, including travel to and from the Event or any series including the Event, I hereby take choose and action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) Waive, Release and Discharge the Oregon Bicycling Association, its directors, officers, employees, volunteers, agents, attorneys, insurers, affiliates, Event holders, Event promoters, Event sponsors, Event volunteers, Event permit grantors, Event property owners, and Event participants (collectively "Releasees"), from any and all liability for my death, disability, personal injury, illness, property damage, property theft, lost income, or any other losses, costs or actions of any kind which hereafter may accrue to me by virtue of my training for the Event, my participation in the Event, my travel to or from the Event, or any other conduct by me related to the Event; (B) Indemnify and Hold Harmless Releasees from any and all liabilities or claims made by other individuals or entities as a result of any of my actions during the Event; (C) Covenant not to sue Releasees and agree that I will not make any claim against Releasees for injury, illness, damages, death, or any other loss arising from or related to my participation in the Event. I understand that if I attempt to sue Releasees in violation of this agreement, Releasees may seek to recover all of their costs, including legal fees. I agree to indemnify, hold harmless, and defend Releasees from and against any and all actions, causes of action, claims, charges, demands, losses, damages, costs, attorney's fees, judgments, liens, indebtedness and liabilities of every kind and character, whether known or unknown, including foreseen or unforeseen bodily injury, illness, and personal injuries and property damage that may be sustained by me or any other person in any way connected to, related to, or arising out of my participation in the Event.
5. I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident and or illness during the Event.
6. I understand that at Event or related activities, I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the Event holders, producers, sponsors, organizers and or assigns.
7. IMPORTANT: OBRA and the organizers of this race do not provide insurance coverage for injuries that occur at the Event. The costs related to those injuries are the responsibility of the individual participant.
8. Bicycle use: Bicycles or bicycle equipment, wheels or other components may be loaned or borrowed for use in the Event. A nominal charge may be collected to cover bicycle maintenance and purchase. This is a loan and does not constitute a rental agreement. I understand that I assume responsibility for the mechanical soundness of any bicycle and its parts, including but not limited to tires, gears, wheels, spokes, hubs, chain, bolts, and all other bicycle parts. I have examined or will examine the bicycle and certify that it is properly assembled and fit to ride. I accept responsibility for damaged or lost equipment.

9. I have read and understand the materials regarding concussions posted at <http://www.obra.org/concussion> 10. The AWRL shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law. I understand that I am giving up substantial rights, including my right to sue Releasees for injuries resulting from the inherent risks of cycling and the ordinary negligence of Releasees. I acknowledge that I am signing this agreement freely and voluntarily, and intend my signature to be a complete and unconditional release of all liability to the greatest extent permitted by law. 11. I hereby certify that I have read this document; and, I understand its content.

PARENT GUARDIAN WAIVER FOR MINORS (Under 18 years old) The undersigned parent and natural guardian or legal guardian does hereby enter into this AWRL on behalf of any and all participants in the Event and represents that he/she is, in fact, acting in such capacity and agrees to save and hold harmless and indemnify each and all of the parties referred to above from all liability, loss, cost, claim or damage whatsoever which may be imposed upon said parties because of any defect in or lack of such capacity to so act and release said parties on behalf of the minor and the parents or legal guardian. The undersigned parent and natural guardian or legal guardian also agrees that they have read, understand and agree to guidelines regarding concussions posted at <http://www.obra.org/concussion>.

Signature Confirmation

Participant Name: Jaime Salazar
Waiver: Event Waiver
Date Signed: April 05, 2025 at 12:58 AM UTC

This document certifies that Jaime Salazar has digitally signed the following waiver agreement(s) for Bend Dirt Fest: Movemint Waiver, Event Waiver.

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