

Miss Heart of the Ozarks Princess Pageant

NAME: _____

PARENT'S NAMES: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____

AGE: _____ GRADE: _____

SCHOOL ATTENDING: _____

SPONSOR: _____

HOBBIES/ACTIVITIES:

INTERESTING FACTS:

CONTESTANT RELEASE AND INDEMNITY AGREEMENT MISS HEART OF THE OZARKS PAGEANT

I, _____ a contestant in the 2017 Miss Heart of the Ozarks Princess Pageant do hereby knowingly and voluntarily release the above referenced pageant, the Miss Arkansas Scholarship Pageant, Inc., and the Miss America Organization, Inc., their Officers, Directors, Trustees, Judges and employees and any other person, firm, individual or corporation charged or chargeable with responsibility or liability, their heirs, administrators, executors, successors, and assigns from and against any and all claims, lawsuits, demands, damages, loss of service, actions and causes of action based upon, arising out of, or in any way related to any honors, rights, or awards sought by me as a contestant in the Miss Heart of the Ozarks Princess Pageant, the conduct of business thereat, the ownership and possession of any honors, rights, or awards thereby, any negligent act, act of misfeasance or non-feasance by the referenced pageants or any of their agents, contractors, servants, volunteers, employees, or licensees in connection with any honors or awards bestowed at said pageants. Further, I do hereby agree to exonerate, hold harmless, and indemnify such pageants listed above from any and all claims that I or my representative may have against such pageants, past, present or future in connection with such honors, rights and awards. Such indemnification to include any and all fees (including reasonable attorney's fees), costs and other expenses reasonably incurred by or on behalf of the above referenced pageants and investigation of or defense against any such claims, lawsuits, demands, actions, or causes or action. I have had a full and adequate opportunity to be thoroughly advised of the terms and conditions of this release and indemnity agreement by counsel of my own choosing. I have also been afforded the opportunity to ask any and all questions that I have concerning this document and its execution by me. I do fully understand the terms of this agreement and do intentionally and voluntarily agree to same.

SIGNED _____
(Contestants Signature)

SIGNED _____
(Parent/Guardian Signature)