

**STEFAN SEIGMANN MEMORIAL RACE WEEKEND**  
**HOSTED BY THE SANTA FE SKI TEAM, INC. (the "Event")**

**FULL AND COMPLETE RELEASE OF LIABILITY AND INDEMNITY AGREEMENT**

I \_\_\_\_\_ (participant name) UNDERSTAND and EXPRESSLY AGREE to the fact that skiing, ski racing, and related activities are **EXTREMELY HAZARDOUS** activities and that I HAVE MADE A VOLUNTARY CHOICE to participate in those activities as a racer, coach, official, or volunteer (individually, "**Participant**" or collectively, "**Participants**") **DESPITE THE EXTREME RISKS** that they present. In consideration of my being permitted to participate in the **Event** named above, I agree to **ASSUME ANY AND ALL RISKS OF INJURY OR DEATH** which might be associated with, or result from, my participation.

I **AGREE** it is my **SOLE RESPONSIBILITY** to view the area of the **Event** **BEFORE** I participate and to not participate if the area of the **Event**, areas adjacent to the **Event**, or conditions are not to my satisfaction.

I hereby **RELEASE FROM LIABILITY AND AGREE TO INDEMNIFY AND HOLD HARMLESS** the organizers and sponsors of this event, the **Santa Fe Ski Team, Inc.**, the **United States Ski and Snowboard Association** and the **Sipapu Ski and Summer Resort**, and all of their directors, representatives, employees, owners, agents, volunteers, landowners, and affiliated companies (collectively, the "**Released Parties**") for any damage, injury or death to myself or to any person or property, **EVEN IF CAUSED BY THE NEGLIGENCE** of any of the **Released Parties**. I further agree to defend and hold harmless the **Released Parties** from any claim, legal action, harm, injury, damages or loss to property, including but not limited to attorney's fees and costs, made against me by third parties who claim to have been injured by me.

If I am a minor (under the age of 18 years old at the time of execution of this document), my parent or legal guardian signing below represents to the **Released Parties** that he or she has the authority to enter into this contract on my behalf and my parent or legal guardian understands and agrees that this release of liability and indemnity agreement will remain in full force and effect and will be binding on me even after I attain the age of majority.

I understand that the **Released Parties** do not provide accident insurance or health insurance for **Participants**. I understand further that I should confirm that I have health and/or accident insurance that protects me in the event of bodily injury before I decide to participate in the **Event**.

In exchange for and in consideration of the **Released Parties** permitting me to participate in the **Event** and in making the **Event** and the ski area available to me, I **CONTRACTUALLY AGREE** that any and all disputes between myself and the **Released Parties** arising from participation in this event, including any claims for personal injury and/or death, will be **GOVERNED BY THE LAWS OF THE STATE OF NEW MEXICO** and the **EXCLUSIVE JURISDICTION** thereof will be in the state or federal courts of the **STATE OF NEW MEXICO**.

I **HAVE READ AND UNDERSTAND** the terms of the above Full and Complete Release of Liability and Indemnity Agreement and I am signing it freely and of my own accord, realizing **IT IS BINDING** upon me, my heirs, executors, and assigns. In the event I am signing it on behalf of a **MINOR**, I state that I have **FULL AUTHORITY TO DO SO AND UNDERSTAND THAT IT IS BINDING ON THE MINOR FOR WHOM I AM SIGNING AS WELL AS BINDING ON ME**. If any part of this agreement is deemed unenforceable, the remainder shall be an enforceable contract between the parties.

**I AM AWARE THAT THIS CONTRACT IS LEGALLY BINDING AND BY SIGNING BELOW I AM RELEASING MY LEGAL RIGHTS AS WELL AS THOSE OF ANY MINOR FOR WHOM I AM SIGNING.**

\_\_\_\_\_  
Printed full name of **Participant**

(age) \_\_\_\_\_ (birth date) \_\_\_\_\_

**Participant's** age today and birthdate

\_\_\_\_\_  
Printed full name of **Participant's** parent or legal guardian

(required if **Participant** is under the age of 18 years old)

\_\_\_\_\_  
**Participant** Signature

\_\_\_\_\_  
Signature of **Participant's** parent or legal guardian

(Required if **Participant** is under the age of 18 years old)

Dated: \_\_\_\_\_ Contact Information (Telephone) (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

(Email address) \_\_\_\_\_