

# ELEVATE YOURSELF

## Personal Commitment and Registration Form *This year's hike is dedicated to Colorado Wildfire Fighting Teams*



**Mt. Lincoln --- THURSDAY AUGUST 22nd**

At some point in your life, you will have a personal and defining moment...sometimes more than one....where you tap into strengths you didn't know you had...where you tested your limits, and realized you went further than you thought you could.

Sometimes you have the honor of experiencing this moment with a loved one, a peer, or in your industry of amazing people.

Challenging yourself is not an easy task...it requires fortitude, persistence, discipline, self-awareness and support.

As a team, we stand beside you, we stand together.

Where you get distracted, we will provide focus.

Where you feel weak, we will be your strength, your loudest cheerleader.

*The thing that is really hard, and really amazing, is giving up on being perfect and beginning the work of becoming yourself...Anna Quindlen*

**Thank you for registering...**you have agreed to make a commitment to elevate yourself and those around you. Please don't do this alone. Invite friends, peers and colleagues. Between now and the hike/walk, you will receive support through email, hiking guidance, and information about the steps needed to properly prepare yourself... learn how to strengthen your heart, mind, and body for such a grand adventure.

**GO!** Find a friend to join you. And **Stay Involved.**

Please email with any questions! [elevateyourselfcolorado@gmail.com](mailto:elevateyourselfcolorado@gmail.com)

Registration Closes August 14, 2019

AUGUST  
22nd 2019

ELEVATE YOURSELF COLORADO is a  
FREE and FUN event for PUBLIC SAFETY PROFESSIONALS

Invitation extended to  
POLICE FIRE EMS 9-1-1  
and associated colleagues, friends, family, vendors

Name \_\_\_\_\_ Email address \_\_\_\_\_

You are representing what agency? \_\_\_\_\_

Title \_\_\_\_\_

Your Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZipCode \_\_\_\_\_

Main Telephone \_\_\_\_\_ Day of Climb Phone # \_\_\_\_\_

Emergency Contact  
Information \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

List anyone not registered who will be attending with you:

Name \_\_\_\_\_ Email \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Email \_\_\_\_\_ Relationship \_\_\_\_\_

Email your registration form: [elevateyourselfcolorado@gmail.com](mailto:elevateyourselfcolorado@gmail.com)

**Informed consent liability waiver:** I have agreed to participate in this event and I waive any and all possibilities of personal damage which may result in participation in this event now and in the future and I accept full responsibility for participation. I have been informed a Physician's approval has been recommended prior to participating in this event. I understand the strenuous nature of this event and accept full responsibility for my health and well-being in this voluntary event. I understand no responsibility is assumed by the organizers of this event.

I understand that there are risks and dangers inherent in participating in ELEVATE YOURSELF COLORADO that includes a 14er hike/walk. I know that the risks and dangers inherent in this activity can occur by natural causes or activities of other persons, animals, participants, volunteers, employees or third parties as a result of negligence or because of other reasons. I appreciate that I may have to exercise extra care for my own person and for others around me in the face of such hazards. I also understand that in consideration for my acceptance as a participant in the activities of ELEVATE YOURSELF COLORADO, and the services and amenities to be provided by of ELEVATE YOURSELF COLORADO in connection with these activities, I agree to assume all risks and to waive, discharge claims and release ELEVATE YOURSELF COLORADO, its employees, contractors, sponsors, officials, and volunteers, and all

governmental and public entities through which the walk will pass as well as the surrounding communities from any and all liability on account of, or in any way resulting from, the risks and dangers inherent in participating in the activities of ELEVATE YOURSELF COLORADO, even if caused by the negligence of the previously identified entities and persons. I further agree to hold harmless the previously named entities and persons from any claims, damages, injuries or losses caused by my own negligence while a participant. I understand and agree that I am releasing not only the entities set forth above but also the officers, agents, employees, and volunteers of those entities.

I understand that this release is made in consideration for my participation of ELEVATE YOURSELF COLORADO and the services and amenities to be provided of ELEVATE YOURSELF COLORADO, and that I will not be allowed to participate of ELEVATE YOURSELF COLORADO until I execute this release.

I understand and agree that this release will have the effect of releasing, discharging, waiving, and forever relinquishing any and all actions or causes of action that I may have or have had on my own behalf and on behalf of my survivors, heirs, assigns and estate, whether past, present or future, whether known or unknown, and whether anticipated or unanticipated by me, arising out of my participation. This release constitutes a complete release, discharge and waiver of any and all actions or causes of action against the entities and persons set forth above and the officers, agents, employees, and volunteers of those entities.

I understand and agree that this release applies to personal injury, property damage, or wrongful death that I may suffer, even if caused by the actions or omissions of others. I understand that by agreeing to this release that I am assuming full responsibility for any and all risk of death or injury or property damage suffered or caused by me while a participant in of ELEVATE YOURSELF COLORADO activities. I understand and agree that this release will be binding on my heirs, my personal representatives and my assigns. I further understand and acknowledge that I assume full responsibility for all costs associated with any personal injury, property damage or wrongful death that I may suffer as a result of participating in this event.

I understand that I am solely responsible for my health and safety, and I acknowledge that I am physically capable of participating in and completing this event. I understand that my name, photograph, voice or likeness may be used for any reason by of ELEVATE YOURSELF COLORADO, their sponsors, licensees, affiliates, subsidiaries and employees. I consent to and authorize, in advance, such use, waive my rights of privacy I have in connection therewith and agree that such materials shall become the sole and exclusive property of ELEVATE YOURSELF COLORADO, and further agree to give up all rights, title, and interest in such property, from and against all claims, etc. arising out of or in connection with the creation of, title to, use and/or distribution of such materials by previously named entities and persons.

I understand that unforeseen events, such as weather, national emergencies, or issues of public safety, may cause cancellation or postponement of ELEVATE YOURSELF COLORADO or otherwise prevent my participation. I hold all parties harmless should such an event occur. If any provision or any part of any provision of this Agreement is held to be invalid or legally unenforceable for any reason, the remainder of this Agreement shall not be affected thereby and shall remain valid and fully enforceable.

Furthermore, I grant full permission to the of ELEVATE YOURSELF COLORADO to use photographs or video/audio tape of me solely for promotion of ELEVATE YOURSELF COLORADO events.

I have carefully read this Liability Waiver in its entirety, fully understand its contents and freely and voluntarily assume all risks and dangers inherent in participating in the activities of ELEVATE YOURSELF COLORADO. I am aware that this is a release of liability and I sign of my own free will.

\_\_\_\_\_  
Name of Participant (please print)

\_\_\_\_\_  
Signature