

**Liability Release and Waiver**  
**HACKBERRY CREEK**  
**Home Owner Association**  
**HOLI COLOR RUN EVENT**

**Name of Participant** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** Irving      **State** TX      **Zip Code** 75063

**Contact Number** \_\_\_\_\_ **Email** \_\_\_\_\_

**Male** \_\_\_\_\_ **Female** \_\_\_\_\_ **Age** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

By my signature and of my free will, I do hereby agree to indemnify and hold harmless the Hackberry Creek Home Owners Association, Irving, Texas and Capital Consultants Management Corporation and their agents or employees and any volunteers or event leaders from any and all claims, demands, costs or expenses arising out of any injuries or damages sustained by myself or any party or person I am responsible to or for. I also give Hackberry Creek Home Owners Association, Irving, Texas and Capital Consultants Management Corporation permission to use my photograph from my participation in this event in their promotional and/or association publications.

I understand that by my willful participation in this event I am solely and completely responsible for any and all medical conditions I (or other person I am responsible to or for) possess and must make known to event or association leadership of any health conditions that may affect my ability (or others I am responsible for) to participate prior to the event.

I understand that the following are recommended for my safety during the Holi Color Run Event: (1) do not wear contact lenses, (2) sunglasses or protective eye wear are strongly recommended, (3) persons with allergies to cornstarch are recommended to not participate, (4) cornstarch powder can be a lung irritant to those with asthma and precaution should be taken, (5) powder should not be thrown at faces, and (6) NO PETS ALLOWED at the event. A bandana or mask may be worn to assist with limiting powder from unintentional introduction to the nose or mouth.

By signing below I agree to the above terms and affirm the information I have provided is true and accurate, and if signing for another I affirm I am the parent or legal guardian of person listed above.

Signature of Participant or Guardian of Participant

Date

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**Event Date: March 4<sup>th</sup>, 2023**