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CS \_\_\_\_\_ Y \_\_\_\_\_  
KS \_\_\_\_\_ Paid \$ \_\_\_\_\_

### RELEASE OF LIABILITY

*In consideration of being allowed to participate in any way in the Dan River Company, Inc., programs, its related events and activities, I*

(Print name) \_\_\_\_\_,

the undersigned acknowledge, appreciate and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular skills, equipment, and personal discipline may reduce the risk, the risk of serious injury does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation I will remove myself from participation and bring such to the attention of the Company immediately and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS THE DAN RIVER COMPANY, INC. their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used for the activity ("releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property associated with my presence or participation, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law, and
5. Address, e-mail and photo release for Dan River Company,inc. promotional use.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT,  
I FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP  
SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY  
WITHOUT ANY INDUCEMENT.

X \_\_\_\_\_ Age: \_\_\_\_\_ Date Signed: \_\_\_\_\_

PARTICIPANT'S SIGNATURE

Address: \_\_\_\_\_

E-mail \_\_\_\_\_@\_\_\_\_\_

#### FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for this participant do consent and agree to his/her release as provided above of all Releasees and for myself, my child and heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees of any and all liabilities incident to my minor child's involvement or participation in these programs provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest amount permitted by law.

X \_\_\_\_\_ Date Signed: \_\_\_\_\_

PARENT/GUARDIAN'S SIGNATURE & (Print name)

Age \_\_\_\_\_

Participant/Parent's Address: \_\_\_\_\_