

2026 Columbia Gorge Marathon – Kids 1K Run Waiver



Child's First and Last Name: _____ **Age:** _____

I am the parent or legal guardian of the minor child named above, and give permission for my child to participate in the 2026 Columbia Gorge Marathon Kids 1K Run.

I understand that participation in a running event involves inherent risks, including but not limited to falls, collisions with other participants or spectators, uneven or slippery surfaces, weather conditions, physical exertion, and other risks associated with an outdoor running event. I understand and voluntarily accept these risks on behalf of my child and represent that, to the best of my knowledge, my child is physically able to participate safely.

In consideration of my child being permitted to participate, I, on behalf of myself and my child, release and hold harmless Columbia Gorge Marathon, Breakaway Promotions LLC, Event sponsors, and their respective owners, employees, agents, representatives, volunteers, contractors, and successors from claims arising from my child's participation in the Event, including claims arising from the ordinary negligence of the released parties, to the fullest extent permitted by law.

I authorize reasonable emergency medical care and transportation for my child if needed during the Event and understand that I am responsible for any related costs.

I grant Columbia Gorge Marathon, Breakaway Promotions LLC, and their authorized representatives permission to photograph, video record, or otherwise record my child during the Event and to use my child's name, image, likeness, voice, photograph, video, or other recording for legitimate promotional, marketing, advertising, social media, informational, or archival purposes without compensation.

I certify that I am the parent or legal guardian of the minor participant named above and have the authority to enter into this agreement on my child's behalf. I have read and understand this waiver, assumption of risk, release of liability, emergency medical care authorization, and photo/media release, and understand that by signing, I am voluntarily giving up certain legal rights for myself and, to the extent permitted by law, on behalf of my child.

Parent/Legal Guardian Printed Name: _____

Parent/Legal Guardian Signature: _____

Date: _____ **Phone:** _____

Emergency Contact Name (must be on site): _____

Emergency Contact Phone: _____