

The Rock Stacking World Championship  
Llano Earth Art Fest  
WAIVER

I, \_\_\_\_\_ (“Participant”),  
acknowledge that I have voluntarily applied to participate in the following activities at  
The Llano Earth Art Festival (“LEAF”): The Rock Stacking World Championship

I AM AWARE THAT THESE ACTIVITIES ARE HAZARDOUS ACTIVITIES AND THAT I  
COULD BE SERIOUSLY INJURED OR EVEN KILLED. I AM VOLUNTARILY  
PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER  
INVOLVED, AND AGREE TO ASSUME ANY AND ALL RISKS OF BODILY INJURY,  
DEATH OR PROPERTY DAMAGE, WHETHER THOSE RISKS ARE KNOWN OR  
UNKNOWN.

I verify this statement by placing my initials here: \_\_\_\_\_  
Parent or Guardian’s initials (if under 18): \_\_\_\_\_

As consideration for being permitted by LEAF, the State of Texas (“State”), the County  
of Llano (the “County”), the City of Llano (the “City”) and any lessor of the festival  
premises (“Lessor”), to participate in these activities and use the festival premises and  
facilities, I forever release LEAF, the State, the County, the City, the Lessor, any fair  
affiliated organization, and their respective directors, officers, employees, volunteers,  
agents, contractors, and representatives (collectively “Releasees”) from any and all  
actions, claims, or demands that I, my assignees, heirs, distributees, guardians, next of  
kin, spouse and legal representatives now have, or may have in the future, for injury,  
death, or property damage, related to (i) my participation in these activities, (ii) the  
negligence or other acts, whether directly connected to these activities or not, and  
however caused, by any Releasee, or (iii) the condition of the premises where these  
activities occur, whether or not I am then participating in the activities. I also agree that  
I, my assignees, heirs, distributees, guardians, next of kin, spouse and legal  
representatives will not make a claim against, sue, or attach the property of any  
Releasee in connection with any of the matters covered by the foregoing release.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS  
CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A  
CONTRACT BETWEEN MYSELF AND LEAF, THE STATE, THE COUNTY, THE CITY,  
AND THE LESSOR, AND SIGN IT OF MY OWN FREE WILL.

If Signed by Parent or Guardian: I verify that the dangers of the activities and the  
significance of this Release and Waiver were explained to the Participant and that the  
Participant understood them. Executed at \_\_\_\_\_, Texas on  
\_\_\_\_\_, 20\_\_\_\_ .

PARTICIPANT/RELEASOR

PARENT OR GUARDIAN

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

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

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

\_\_\_\_\_

IF YOU ARE UNDER 18 YEARS OF AGE, YOU AND YOUR PARENT OR GUARDIAN  
MUST SIGN AND INITIAL THIS FORM WHERE INDICATED.