



Timothy K. Cameron
SHERIFF

Office of the Sheriff

St. Mary's County, Maryland

Headquarters
23150 Leonard Hall Drive
Leonardtown, MD 20650
301-475-4200 Ext. 1900
301-475-4047 Fax

Detention Center
41880 Baldrige Street – P.O. Box 960
Leonardtown, MD 20650
301-475-4200 Ext. 3200
301-475-4095 Fax



An Internationally
Accredited Agency

“SMCSO Murph Challenge”

PARTICIPATION WAIVER OF LIABILITY

I, _____, whose
date of birth is _____, and whose current address is
_____, in
consideration of my being permitted to participate in the “event” (SMCSO Murph Challenge)
hosted by the St. Mary’s County Sheriff’s Office do hereby relieve and hold harmless, for any
injury or damage I may suffer as a result of my participation, the Sheriff of St. Mary’s County, the
St. Mary’s County Government, the State of Maryland, and any and all other persons who may
assist the Sheriff or the County in the administration of this event. I certify that I have educated
myself concerning the nature of the event, and I understand that the physical activities involved
require a high level of strength and physical conditioning. I have had the opportunity to consult
with a physician of my choosing regarding my participation in this process and on sound medical
advice, and/or of my own free will, have decided to participate and accept the liability for any and
all injuries or damages I may incur as a result of the event. I certify, further, that I have had the
opportunity to discuss this document with an attorney and, with complete understanding, do agree
to its conditions.

I irrevocably grant the Sheriff of St. Mary’s County, or designees, permission to record my
voice and photograph me in conjunction with the event. I understand and agree that the term
“photograph” as used herein encompasses both digital images, still photographs and video
recordings. I further grant the Sheriff of St. Mary’s County, or designees, permission to use

my photograph, voice, and likeness taken in conjunction with the event, in any form. This includes edited versions, in or over any medium, including without limitation: streaming audio and/or video over the internet, broadcast, cable, and/or satellite transmissions, worldwide for any legitimate purpose. These purposes include without limitations, any commercial purpose, without compensation to me. I further waive any right and inspection of any such recordings and photographs. I understand any such recordings and photographs recorded by, or used by, the Sheriff of St. Mary's County, or designees, shall become the sole property of the Sheriff of St. Mary's County and/or the photographer, as applicable.

Date: _____

Participant's
Signature: _____

(If Applicable) Parent or Legal Guardian Signature:

Date: _____

Date: _____

Witness Printed
Name: _____

Witness
Signature: _____

Note: Photo identification of each participant will be required at check-in/onsite registration. For underage participants ages 16-18, parent/legal guardian must be present at event check-in/onsite registration with photo identification; or Public Notary certification with seal, of the above parent/guardian signature, must be present in the space provided below.