FISHING AND/OR WATERCRAFT EVENT
WAIVER, RELEASE AND CONSENT

SAFETY IS THE PRIMARY CONCERN OF HOME SERVICE OIL COMPANIES (HSO) AND THE MUSCULAR DYSTROPHY ASSOCIATION, INC. ("MDA®"). MDA AND HSO REQUEST THAT YOU WEAR APPROPRIATE CLOTHING AND PROTECTIVE GEAR. ADDITIONALLY, HSO AND MDA REQUEST THAT YOU READ, UNDERSTAND AND ABIDE BY ALL APPLICABLE **U.S. COAST GUARD, MISSOURI LAKE PATROL AND MISSOURI DEPARTMENT OF WILDLIFE CONSERVATION, REQUIREMENTS, RULES, REGULATIONS AND SAFETY LAWS**, ALL OF WHICH ARE AVAILABLE FOR YOUR REVIEW AT THE EVENT REGISTRATION TABLE(S). **HSO AND MDA ALSO REQUEST THAT YOU DO NOT PARTICIPATE IN THE BELOW REFERENCED EVENT WHILE UNDER THE INFLUENCE OF ALCOHOL OR DRUGS.**

NAME OF EVENT: HSO/MDA BUDDY BASS TOURNAMENT

DATE: APRIL 9, 2011

LOCATION: LAKEVIEW RESORT
SUNSET BEACH, MISSOURI

In consideration of HOME SERVICE OIL COMPANIES AND THE MUSCULAR DYSTROPHY ASSOCIATION, permitting me (my child) to participate in the above-named event, I hereby, and for my (my child's) heirs, executors, administrators, assigns, and all legal guardians, **WAIVE AND RELEASE ANY AND ALL RIGHTS AND CLAIMS OF ANY NATURE, FOUNDED IN WHOLE OR IN PART UPON ANY TYPE OF NEGLIGENCE**, that I (my child) may have against HSO, MDA, their respective directors, officers, employees, agents, chapters, assignees, licensees, volunteers and any cooperating entities, their representatives, heirs, executors, administrators, successors, and assigns (the "Released Parties") arising out of or resulting from any and all injuries or damages of any nature, including death, which I (my child) may suffer while taking part in the event or any activities connected with the event. **I UNDERSTAND THAT THIS MEANS THAT I AGREE NOT TO SUE** any or all of the Released Parties in connection with the event.

I AM (MY CHILD IS) EXPERIENCED IN AND FAMILIAR WITH FISHING AND THE OPERATION OF POWER BOATS WATERCRAFTS AND FULLY UNDERSTAND THE RISKS AND DANGERS INHERENT IN THIS SPORT. I am (my child is) voluntarily participating in the event and I expressly agree to assume sole responsibility for my (my child's) safety and the safe and successful operation of my (my child's) watercraft, and to accept the entire risk of any accidents or personal injury, including death, which I (my child) might suffer as a result of my participation in the event. I further understand that I assume all risks in my (my child) participating in the event.

Consent also is hereby given to use (my) (my child's) name, picture, portrait, likeness, writings or biographical information(including, if applicable, neuromuscular disease diagnosis), and audiotape and/or videotape recordings and sound or silent motion pictures of (me) (my child) in any medium for editorial, educational, promotional, and advertising purposes, for the solicitation of contributions, and/or for any other purpose in furtherance of the corporate purposes and objectives of HSO and MDA.

By signing this document, I certify that I have read this document and fully understand it, and that I am not relying on any statements or representations of any of the Released Parties. This document shall be binding upon me, my (my child's) heirs, executors, administrators and assigns and all legal guardians (of my child).

_____
Print Name of Participant

_____ _____
Signature of Participant Date

_____
Home Address, City, State & Zip Code

_____
(Signature of Parent/Legal Guardian if Participant is over 12 but under 18)*

* I affirm that I am the parent/legal guardian of the above-named Participant and that I have full authority to authorize his/her participation in the above-referenced MDA event.