

RELEASE AND CONSENT

If Participant is a minor, the following additional information must be provided and Participant's Legal Guardian must sign below:

Name of Participant: _____

Name of Minor Participant: _____

Participant Telephone No.: _____

Name of Participant's Legal Guardian: _____

Name of Emergency Contact: _____

Telephone No. of Participant's Guardian: _____

Emergency Contact's Telephone No.: _____

Is Participant a Minor (under age 18)? Yes or No (must circle one)

Guardian's Relationship to Participant: _____

Note: If Participant is a minor, then Participant's Legal Guardian must execute this Release and Consent below, and in doing so the Legal Guardian consents to Participant's participation in the Activities and agrees to the terms and conditions contained herein.

I desire to participate in certain activities in connection with the volunteer recycling program at Busch Stadium in St. Louis, Missouri (the "Activities"). As an inducement for, and in consideration of, the agreement that I may participate in the Activities, I hereby agree, covenant, represent and warrant, on behalf of myself and on behalf of my administrators, assigns, conservators, estate, executors, heirs, personal representatives and successors, to RELEASE, HOLD HARMLESS AND INDEMNIFY St. Louis Cardinals, LLC, and each of its affiliated, parent and subsidiary companies, agents, representatives, contractors, licensees, concessionaires, managers, members, owners, directors, employees, officers and shareholders (hereinafter collectively referred to as the "Released Parties") of and from any and all actions, causes of action, claims, costs, damages, demands, expenses, lawsuits, liabilities and losses arising from any injury or other damage or loss to person or property that I may suffer directly or indirectly as a result of my participation in the Activities, including those that may arise from the negligence of the Released Parties.

Should I suffer any personal injury in connection with the Activities, I authorize the Released Parties to use their discretion as to whether or not I should be transported to a medical facility for x-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care (collectively, "Medical Care"). I hereby accept full responsibility for all costs and expenses associated with such Medical Care administered to me and release the Released Parties from liability associated with any Medical Care.

I also grant full consent and permission to the Released Parties to use my name, likeness and voice, as well as any photographs or recordings of any type of me taken or made before, during or after the Activities for any purpose whatsoever, including, without limitation, commercial purposes. I also understand and agree that I will not be compensated for the Released Parties' use of my name, likeness, voice, and any photographs or recordings taken of me in connection with the Activities.

I further state that I have read this Release and Consent. I fully understand the conditions and terms of this Release and Consent. I have full authority, power and right to sign this Release and Consent. I have voluntarily signed this Release and Consent and intend for it to be legally binding.

By executing below, Participant hereby agrees to the terms and conditions contained in this Release and Consent.

If Participant is a minor, Legal Guardian Must Execute:
The undersigned Legal Guardian hereby certifies that he/she is the Legal Guardian of Participant and agrees to the terms and conditions contained in this Release and Consent.

Printed Name of Participant

Printed Name of Legal Guardian

Signature of Legal Guardian

Signature of Legal Guardian

DATED: _____, 20__

DATED: _____, 20__

