

RELEASE CANDIDATE/TITLEHOLDER

This Release is made the date and year last written by the undersigned (candidate/titleholder) or the undersigned's parent/guardian if candidate is not at least eighteen (18) years old. This is intended to release all claims related to COVID-19 that have occurred or may arise against the Miss America Organization Inc., its licensees and sublicensees.

In addition, the undersigned agrees by being a participant in any competition or any gathering on behalf of the Miss America Organization Inc. (MAO), which includes MAO, affiliates, licensed state and local organizations as well as Miss America's Outstanding Teen (MAOTeen), the undersigned shall assume their own risk of liability against COVID-19 or its mutations and shall indemnify and release any claims against MAO and MAOTeen related to COVID-19.

The undersigned also agrees by being a participant in any competition or any gathering on behalf of the Miss America Organization Inc. (MAO), which includes MAO, affiliates, licensed state and local organizations as well as Miss America's Outstanding Teen (MAOTeen), should she test positive within 10 days prior to the first day of or anytime during the local, state, and/or national competition, she will forfeit the opportunity to continue competing in the competition, and thus, the subsequent level competition whether at the local, state, and/or national competition, and shall indemnify and release any claims against the Miss America Organization Inc. regarding said forfeiture. However, if the candidate has record of a positive test within 90 days prior to said competition, has completed her isolation period (10-14 days), and has no fever and improving symptoms per CDC recommendation, said candidate will be permitted to compete as they are no longer considered infectious by the CDC.

This agreement shall cover the term of February 17, 2020 through and including December 31, 2021.

Dated this _____ date of _____, 2021.

By: _____
Candidate/Titleholder or Parent/guardian, if applicable (signature)

Name: _____
Candidate/Titleholder or Parent/guardian, if applicable (print)

Candidate/Titleholder Contact info:

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Email: _____