



WAIVER OF LIABILITY/PERMISSION/MEDICAL RELEASE FORM

1. ACKNOWLEDGEMENT OF RISKS AND WAIVER OF LIABILITY:

Customer acknowledges that the wing sauce is made with pepper extract, some of the hottest peppers on earth: Bhut Jolokia or Ghost Pepper, Habanero, and other secret seasonings and spices with an extreme degree of heat. Customer acknowledges that there are risks of personal injury, illness and possible loss of life, and risks of damage to or loss of personal property, which may result from consuming the Ghost Wing Sauce. Customer voluntarily assumes all of these risks. Customer will use sauce for personal consumption only, and will not allow anyone else to try the Ghost Wing Sauce. Customer agrees to indemnify, defend and hold harmless The Broken Barrel Tavern and affiliated companies, their vendors, their advertising, promotion and public relations agencies, co-sponsoring companies and their affiliates and agencies, and all officers, directors, employees and agents of the aforesaid entities, from any and all claims and costs, including attorneys' fees, relating to, arising from or in connection with consuming the Ghost Wing Sauce. In so doing, customer releases and indemnifies the aforesaid entities and individuals from liability for injuries or damages of any kind arising from or in connection with consuming the Ghost Wing Sauce. In no event shall The Broken Barrel Tavern be liable to a customer for acts or omissions arising out of or related to the customers consumption of the Ghost Wing Sauce.

2. PURCHASE OF GHOST WING SAUCE

You will not be allowed to purchase Ghost Wing Sauce without this form completely filled out and signed.

Name of customer: _____ Date of Birth: _____

Home address: _____

Phone: _____ Day _____ Evening _____ Cell _____

Email: _____

- I hereby release, indemnify and hold harmless The Broken Barrel Tavern trustees, employees, agents and assigns from any and all liability, damage, claim of any nature whatsoever arising out of or in any way related to my consuming the Ghost Wing Sauce. Participating in any activity is an acceptance of some risk of injury. I agree that my safety is primarily dependent upon my taking proper care of myself. I assume all risks related to the activities. In case of an emergency, I do hereby authorize and consent to any medical treatment or care deemed advisable.
- I have read and agree to comply with the rules and regulations for consuming The Broken Barrel Tavern Ghost Wing Sauce.
- I will not allow any allow anyone other than myself consume the Ghost Wing Sauce.
- My signature below indicates that I have read, understand and have freely signed this agreement. I expressly agree that this agreement shall be construed and enforced in accordance with Florida laws, and I consent to the jurisdiction of said state. I agree that this waiver and release is intended to be as broad and inclusive as permitted under Florida laws so that if any portion hereof is held invalid, the balance shall continue in full legal force and effect.

Customer Signature _____ Date _____