

SOUTHWEST MN HACKS 2.0

24-Hour Student Hackathon | September 12 to 13, 2026 | SMSU, Marshall, Minnesota

PARTICIPANT WAIVER AND RELEASE FROM LIABILITY

For Participants 18 Years of Age or Older

Event	Southwest MN Hacks 2.0, a 24-hour overnight student hackathon
Dates	Saturday, September 12, 2026 through Sunday, September 13, 2026
Venue	Upper Conference Center (or other space designated by SMSU), Southwest Minnesota State University, 1501 State Street, Marshall, Minnesota 56258
Host	Southwest MN Hacks, a Minnesota nonprofit corporation

Full Legal Name	Date of Birth
Email	Mobile Phone
School or Affiliation	Home City and State

1. Acknowledgment of Risk

I, the undersigned, voluntarily request to participate in Southwest MN Hacks 2.0, a 24-hour overnight student hackathon hosted by Southwest MN Hacks at Southwest Minnesota State University. I understand that participation involves extended periods of computer work, an overnight stay on the SMSU campus with limited sleep, meals and beverages provided at the event, and movement throughout the venue.

I acknowledge that participation may involve risk of bodily injury or illness ranging from minor episodes such as eye strain, repetitive strain, fatigue, slips, trips, or falls, to more serious events, and that it is not possible to list every possible risk. Knowing the material risks and reasonably anticipating that injuries and other adverse outcomes are possible, I assume all risks which could occur as a result of my participation.

I confirm that I am physically and mentally fit to participate, and I agree to disclose to the organizers any medical condition, allergy, or required medication that is not self-evident and that could reasonably affect my safety or the safety of others during the event. I have provided disclosures in the section below to the best of my knowledge.

2. Emergency Contacts

List a primary and a secondary emergency contact, both reachable during the event window.

	Name	Relationship	Phone (during event)
Primary			
Secondary			

3. Health, Dietary, and Accessibility Information

Please disclose any of the following that organizers should be aware of. This information is used to support your safety and participation at the event. Leave blank if not applicable.

Known allergies (food, medication, environmental):

Current medications and any medical, behavioral, sensory, mobility, or support needs organizers should be aware of:

Dietary needs and restrictions (allergies, religious, medical, vegetarian, vegan, other):

Accessibility or accommodation needs (assistive technology, quiet area, mobility, sensory, communication, other):

Authorization for emergency medical assistance. In the event of injury, illness, or other medical emergency during the event, where I am unable to give consent for myself due to incapacity, unconsciousness, or other reason, I authorize Southwest MN Hacks organizers, SMSU Public Safety, and attending medical personnel to contact emergency services and to obtain or administer emergency medical care, including transportation to a hospital and treatment by qualified providers, as they deem reasonably necessary for my welfare. I understand that my emergency contact will be notified as soon as practicable and that I remain financially responsible for any costs of care under my health insurance.

4. Registration and Accountability

I understand that all participants must be registered and approved by Southwest MN Hacks in advance of the event. Walk-in attendance is not permitted unless expressly approved by the organizers. I agree to check in at the start of the event, remain accounted for during the event, and check out at the conclusion of the event. If I leave the venue overnight, I agree to sign out before departure and to re-enter only through the monitored entrance designated by the organizers. I will display the name tag or other identifier issued at check-in at all times during the event.

5. Release of Liability

In consideration of Southwest MN Hacks and Southwest Minnesota State University permitting me to participate, I, on behalf of myself and my heirs, executors, and assigns, hereby waive, release, and hold harmless Southwest MN Hacks and its officers, directors, organizers, volunteers, mentors, judges, sponsors, and agents, as well as the State of Minnesota, the Minnesota State Colleges and Universities system, and Southwest Minnesota State University, including their officers, agents, coaches, and employees, from any and all injuries, loss, liability, actions, causes of action, negligence, debts, claims, or demands of any kind which may arise by or in connection with my participation in any activities related to this event.

This release is intended to apply to ordinary negligence and to the inherent risks of participation to the fullest extent permitted by Minnesota law. Nothing in this document is intended to release claims that cannot legally be waived, including claims arising from gross negligence, reckless conduct, willful misconduct, or intentional acts.

6. Code of Conduct

I acknowledge that I have read and agree to abide by the Southwest MN Hacks 2.0 Code of Conduct and Overnight Safety Rules, which is provided to me as a separate document and which I will sign at registration. I understand that organizers and SMSU Public Safety may enforce the Code, and that violations may result in removal from the event without refund and, where appropriate, referral to SMSU Public Safety or local law enforcement.

7. Photo and Media Release

Please check one option:

- I grant permission.** Southwest MN Hacks and its designated representatives may photograph, record, and use my likeness in event materials, recap content, sponsor reports, and social media in connection with the event and future event promotion.
- I do not grant permission.** I understand I may be issued a visual indicator at check-in so that organizers and photographers can identify and exclude me from event imagery.

8. Signature

I, hereby, acknowledge that I am 18 years of age or older, have read and understand this document, and am voluntarily signing this waiver.

Date

Participant Signature

Participant Name (printed)

Date

Witness Signature (Southwest MN Hacks organizer)