

EXHIBIT B

VOLUNTEER RELEASE AND WAIVER OF LIABILITY

PLEASE READ CAREFULLY. THIS IS A LEGAL DOCUMENT WHICH AFFECTS YOUR LEGAL RIGHTS.

THIS RELEASE AND WAIVER OF LIABILITY (the "Release") executed on this ____ day of _____, 201__ by _____ (the "Volunteer") in favor of Miles Against Melanoma, Inc. ("MAM").

Volunteer desires to volunteer in connection with the [*MAMKC 5K*] hosted by MAM on [_____] (the "Event"). Volunteer does hereby freely execute this Release under the following conditions:

Waiver and Release. By signing this Release, Volunteer hereby releases and holds harmless MAM and its successors and assigns, its directors, employees and staff, from any and all liability, claims, and demands of whatever kind or nature which arise or may hereafter arise as result of Volunteer's participation in the Event.

Volunteer understands that this Release discharges MAM, its directors, employees and staff, from any liability or claim whatsoever that Volunteer may have against MAM regarding any claim or demand that may result from Volunteer's participating in the Event. Volunteer also understands that MAM does not assume any responsibility for providing any assistance to Volunteer, including but not limited to medical, health, disability, or worker's compensation insurance.

Medical Treatment. Volunteer releases MAM from any claim whatsoever which arises or may hereafter arise as a result of any first aid, treatment, or service rendered in connection with Volunteer's participation in the Event, or with the decision by any representative of MAM to exercise the power to consent to medical or dental treatment.

Assumption of Risk. Volunteer understands that the Event may include activities which may be hazardous to Volunteer. Volunteer hereby expressly assumes the risk of injury or harm in these activities and release MAM, its directors, employees and staff, from all liability for any claim or demand resulting from the Event and/or Volunteer's involvement with the Event.

Insurance. MAM expressly disclaims any responsibility for providing any insurance coverage for Volunteer, including, but not limited to health, medical, disability, liability or worker's compensation. EACH VOLUNTEER IS EXPECTED AND ENCOURAGED TO ARRIVE WITH MEDICAL OR HEALTH INSURANCE COVERAGE IN EFFECT.

Photographic Release. By signing this Release, Volunteer also transfers unto MAM all right, title, and interest in any and all photographic images and video or audio recordings made by MAM including, but not limited to, any royalty benefits or other proceeds that could be received from such photographs or recordings.

Age Limitation. Volunteer certifies the he/she is at least 18 years of age.

Other. Volunteer expressly agrees that this Release is permitted and governed by the laws of the State of *Missouri* Volunteer agrees that in the event that any clause or provision of this Release shall be held to be invalid by a court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable.

IN WITNESS WHEREOF, Volunteer has executed this Release as of the day and year first above written.

I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTOOD THE TERMS AND CONDITIONS OF THE FOREGOING RELEASE AND THAT I WILL COMPLY WITH THE SAME.

Printed Name: _____

Signed Name: _____ Date: _____