

CITY OF BISBEE PROGRAM PARTICIPANT RELEASE AND WAIVER OF LIABILITY FORM

PLEASE READ CAREFULLY! THIS IS A LEGAL DOCUMENT THAT AFFECTS YOUR LEGAL RIGHTS!

Participant's Name _____

Participant's Age (if under 18) _____

Participant's Guardian (if under 18) _____

Address _____

Phone _____

Email _____

Program/Event _____

In consideration of acceptance into the above referenced City program, I do hereby, for myself, my children, my heirs, executors and assigns, release the City of Bisbee and the officials, officers, agents and employees of the City from all liability, claims, and demands of whatever kind or nature, either in law or in equity, which I, or my minor children, may suffer while participating in the above-described program. This includes all risks that are connected with this activity whether foreseen or unforeseen. I understand and acknowledge that this Release Discharges the City from any liability or claim that I may have against the City with respect to bodily injury, personal injury, illness, death, or property damage, including, but not limited to COVID-19, that may result from participation in the activity.

I understand that the services provided by me to the City may include activities that are inherently dangerous to me. I hereby expressly assume the risk of injury or harm to me from these activities and Release the City from all liability for injury, illness, death, or property damage resulting while I am participating in such activities. I agree to indemnify and hold the City and its agents, officials and employees harmless from any damage to persons or property, resulting from my negligence and/or intentional acts.

I assume the responsibility of mental and physical fitness to participate in said program, and agree to abide by all the rules and requirements of the program.

I am of lawful age and legally competent to sign this Agreement for and in behalf of the participant.

I understand the terms of this document and have signed this document as my own free act.

I have fully informed myself of the contents of this release by reading it before I signed it.

I realize that by signing this document I am giving up legal rights which I may be entitled.

BY SIGNING BELOW, I, THE ABOVE NAMED VOLUNTEER, HAVE CAREFULLY READ THIS RELEASE AND AM AWARE OF ITS CONTENTS, AND EXPRESS MY UNDERSTANDING AND INTENT TO ENTER INTO THIS RELEASE KNOWINGLY AND VOLUNTARILY.

Name Signature Date

