

CITY OF EXETER PARKS AND RECREATION
RELEASE, WAIVER OF LIABILITY AND ASSUMPTION OF THE RISK
AGREEMENT FORM
READ CAREFULLY BEFORE SIGNING

In consideration of being allowed to participate in the **City of Exeter Parks and Recreation**, athletic sports or recreation programs, and related events and activities, the undersigned acknowledges, appreciates, and agrees that ***the risk of serious injury including, but not limited to, permanent paralysis, injury, and death, is significant and does exist, even though particular rules, equipment, and personal discipline may reduce the risk.*** Therefore:

1. **I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS**, both known and unknown, **EVEN IF ARISING FROM THE NEGLIGENCE OF THE ABOVE NAMED ORGANIZATION** or others, and assume full responsibility for my participation;
2. I willingly agree to comply with the stated and customary terms and conditions of participation. If I observe any unusual significant hazard during my presence or participation, I will either remove the hazard, if possible, or discontinue my participation and/or bring such hazard to the attention of the nearest official immediately; and
3. I, for myself, my heirs, assigns, personal representatives and next of kin, hereby **RELEASE AND HOLD HARMLESS** the above named organization, their officers, officials, agents, employees, volunteers, other participants, sponsors, advertisers and owners and lessors of the premises used to conduct the event, for **ANY AND ALL UNJURY, DISABILITY, DEATH**, or loss or damage to person or property, **ARISING FROM THE NEGLIGENCE** of the above named organization.

This is to certify that I, as parent or legal guardian, have **LEGAL RESPONSIBILITY** for this participant. I have read and understand the significance of this **RELEASE AND WAIVER** and do consent and agree to his/her waiver, release and assumption of the risk as provided above. I release and agree to indemnify and hold harmless the above named organization and associated persons from any and all liabilities for injury or damage to the above minor while participating in these programs **ARISING FROM THE NEGLIGENCE** of the above named organization and associated persons.

(Parent/Legally Responsible Guardian Signature)

Date signed: _____

Print Name

Emergency phone #: _____

DATE:

FEE:

CASH/CHECK #: