



M.D. of Opportunity No. 17

Recreation Programs

EVENT: _____ Date: _____

COMMUNITY EVENT TAKING PLACE: _____

PARTICIPANT'S NAME: _____ AGE: _____

PARENT/GAURDIAN (S) NAME: _____

ADDRESS: _____

PHONE: _____ CELL: _____

Where the term "Municipal District of Opportunity No. 17" appears in this agreement, it shall include the Municipal District of Opportunity Council, members, officers, employees, volunteers, agents and anyone else acting on behalf of the Municipal District of Opportunity. The event includes Community Services Outreach Programs.

I _____ wish to participate or allow my child to participate in the Event. I understand that participating in the Event involves inherent risk, dangers and hazards.

I also understand that the Event involves risks of injury to me and the causes of these injuries may include my own negligence, the negligence or deliberate wrongdoing of other participants in the event, or the negligence of the Municipal District or Opportunity. I hereby freely accept all of these risks however caused, whether the risk results in personal injury, property damage or some other harm to me.

As a condition of the Municipal District of Opportunity No.17 allowing me to use lands under municipal direction and control while participating in the Event, I agree to waive all claims, that I, my heirs, executors, and assigns, have or may have in the future against the Municipal District of Opportunity No.17 for any injury, property damage, financial loss, or any other loss that may result directly or indirectly from my participation in the Event, no matter how this loss is caused, INCLUDING NEGLIGENCE ON THE PART OF THE MUNICIPAL DISTRICT OF OPPORTUNITY No. 17.

In consideration of using the Municipal District of Opportunity No. 17 lands as authorized for the said Event and further release the Municipal District of Opportunity No. 17, the council of the Municipal District of Opportunity No. 17, and the Councilors of the Municipal District of Opportunity No. 17, past, present, or future, its officers, employees, servants, independent contractors and agents (hereinafter collectively referred to as Municipal District of Opportunity No. 17) from all liability.

I do hereby agree to indemnify and hold harmless the Municipal District of Opportunity No. 17 from any and all claims, demands, causes of action of any kind whatsoever, including those involving negligence on the part of the said Municipal District of Opportunity No. 17, that may be made against the Municipal District of Opportunity No. 17, arising out of or connected with participation in the Event referred to above.

PLEASE READ AND SIGN THE FOLLOWING WAIVER, RELEASE AND INDEMNITY AGREEMENT BY SIGNING THIS WAIVER AGREEMENT YOU WILL BE GIVING UP CERTAIN RIGHTS INCLUDING THE RIGHT TO SUE. NO ONE MAY PARTICIPATE IN THE EVENT WITHOUT SIGNING THIS WAIVER AGREEMENT.

This waiver has been signed the ____ day of _____, 20____.

Participant Signature

Parent Signature