

GENERAL LIABILITY RELEASE AND WAIVER

Please read this entire document. Write your name or the name of your organization as indicated and sign in the appropriate space at the bottom as the representative of yourself, your organization, and related participants.

IN CONSIDERATION of being granted a position as an entrant and/or permission to participate in the City of Antioch _____ the undersigned agrees and states as follows:

1. I, the undersigned, understand that I am responsible for understanding and complying with all site regulations and instructions and that I am responsible for informing all persons involved with my activity entry of this information.
2. I, the undersigned, am aware of and understand the inherent risks, hazards and dangers associated with participation and voluntarily elect to enter and/or participate in the activity on the terms, conditions, and covenants set forth herein. I also understand the inherent risks associated with inviting and allowing other individuals to participate in my activity entry, that all other individuals who are associated with my entry at any time are doing so upon my invitation and permission, and that I, and not the City, am ultimately responsibility for their actions and safety.
3. With a full understanding of the foregoing, I voluntarily desire to participate in the activity and assume all risks and waive and release City and its officers, employees and agents from any claims or liability for personal injury (including death) or property damage arising from or connected with participation in the activity, even if the liability may arise out of negligence or carelessness of the City or its officers, employees and agents.
4. I further agree to hold harmless, indemnify and defend the City and its officers, employees and agents, who through negligence or carelessness might otherwise be liable to me (or my heirs or assigns). In the event of injury or illness, I consent to and agree to be responsible for costs for transportation to a medical facility and whatever examination, procedure or treatment considered necessary by the medical personnel. This assumption of risk, release and hold harmless is binding on my heirs, dependents, executors, administrators, and assigns.
5. I agree to abide by any rules and regulations for the activity and will ensure any individual participating in my activity entry will do the same. I give consent to the City of Antioch to photograph or video the participant for any legitimate purpose by the City or sponsors of this activity.
6. I warrant that the state of my physical health, and that of the individuals I allow to participate in my activity entry, will be sufficiently sound on the day of the activity to permit such person to safely participate.
7. I also understand that any photos, videos, or recordings taken of me, my family members, or my entry participants at this public event may be used for City purposes, including, but not limited to: websites, print brochures, or newspaper advertising.

THE UNDERSIGNED HAS READ AND UNDERSTANDS THIS **GENERAL LIABILITY RELEASE AND WAIVER** IN ITS ENTIRETY AND VOLUNTARILY SIGNS SAME, without reliance on any representations, statements, or inducements, express or implied, made by any party whomsoever.

Organization/Business: _____

Parent's Name: _____ Signature: _____ Date: ____ / ____ / ____

Minor's Name(s): _____