## 2017 INDEMNIFICATION, HOLD HARMLESS AND RELEASE FOR THE ARBOR DAY 5K RUN



PLEASE READ AND SIGN IF YOU ARE REGISTERING YOUR CHILD TO PARTICIPATE IN THIS EVENT.

## NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN

READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF THE CITY OF PALM COAST USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM THE CITY OF PALM COAST IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND THE CITY OF PALM COAST HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

CONSENT, RELEASE & WAIVER OF LIABILITY

## (Read Carefully before signing)

Event: ARBOR DAY 5K RUN, MAY 6, 2017	
Participating Child:	
Parent(s)/Legal Guardian(s):	
As Parent(s) or Legal Guardian(s) of the above-named Child, I(We) hereby given my for Child to participate in the above-described Event, which is a community-sponsor consideration of the City's acceptance of the Child's participation in the Event, understanding that Child's participation in the Event could result in <b>serious injury</b> , <b>property loss or damage</b> , including, but not limited to, injuries caused by terrai equipment; weather; temperature; vehicular or pedestrian traffic; Child's physical at or inactions of other people, I(we) hereby <b>recognize and agree to assume all ri</b> unknown, that might arise through Child's participation in the Event, and on my (ou on behalf of Child, and all of Child's parents, guardians, next of kin, heirs, representatives, successors and assigns, and/or survivors, <b>I(we) release and harmless</b> , the Released Parties as defined below, from any and all liabilities, cla damages, actions, costs or expenses of any nature, known or unknown, arising out of connected with Child's participation in the Event. I(We) further agree to indemnify of the Released Parties harmless against any and all liabilities, claims, demands, dar costs or expenses of any nature, including, but not limited to, all attorney's fe expenses, whether at the trial or appellate level, arising out of or in any way connected participation in the Event.  The Released Parties are the City of Palm Coast, its elected officials, officers, emprontractors, volunteers, successors and assigns. <b>I(we) understand and agree that</b>	red activity. In and with the death, and/o in, facilities of collities; action sks, known o ir) own behalf executors and forever hold ims, demands for in any way and hold each mages, actions ees, costs and ed with Child'
Release & Waiver of Liability includes any claims based on the negligence, action of any of the Released Parties, and covers bodily injury, death and/or property dewelcher suffered by me(us) or by Child, before, during or after participation in the Experimental Control of the Released Parties and Covers bodily injury, death and/or property dewelcher suffered by me(us) or by Child, before, during or after participation in the Experimental Covers and Covers bodily injury.	ons or inaction amage or loss
I(We) certify that my(our) Child is physically fit, sufficiently trained and capable of pathe Event, and has not been advised otherwise by a qualified medical person. I(medical treatment and services for my(our) Child, if the need arises, and I(we responsibility and will fully indemnify the Released Parties for all medical and other for such treatment and services.	We) authorize e) assume th
I(We) acknowledge that the City of Palm Coast will not provide insurance coverage to for any bodily injury, death and/or property damage or loss, as a result of or arising participation in the Event.	
I(We) certify that I(we) have carefully read this Consent, Release & Waiver understand its contents, and voluntarily sign below	of Liability
Parent(s)/Guardian(s) Signature:	
Parent(s)/Guardian(s) Printed Name(s):	

## **Authorization to Photograph:**

and my(our) family members while partisaid Child's name, face, likeness, voice advertising, promotional and commercial City website, or other broadcast or soci	st to take photographs and video recordings of my(our) child icipating in the Event, and further agree that City may use and appearance in connection which exhibitions, publicity, materials, without reservation or limitation, in print, on the al media. These photographs will only be used for City and will involve no compensation to me(us) or my(our)
	on for my(our) child/family members to be photographed. for my(our) child/family members to be photographed.
Acknowledgement of Benefit:	
By signing below, I agree to allow by cheenefits to my child engaging in this activ	nild to participate in the above Event and acknowledge the ity.
Signature:	Date:
Signature	Date