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## RELEASE OF LIABILITY & INDEMNITY

Organization or Group: \_\_\_\_\_ Date: \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

***In case of emergency please notify:***

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

### WAIVER OF LIABILITY, RELEASE, AND INDEMNITY AGREEMENT

#### WAIVER OF LIABILITY

IN CONSIDERATION OF THE USE OF THE MCINNISH FIELD #17 AND ADJACENT LAND DEPICTED ON THE ATTACHED EXHIBIT A ("FLYING FIELD") AND RECOGNIZING THAT THE ACTIVITIES RELATED TO USE OF THE FLYING FIELD MAY INVOLVE CERTAIN INHERENT DANGERS AND RISKS, I DO HEREBY AGREE TO ASSUME THE RISKS ATTENDANT TO SUCH ACTIVITY, TO INCLUDE BUT NOT LIMITED TO: PROPERTY DAMAGE OR PERSONAL INJURY TO MYSELF RESULTING FROM THE ACTS, ERRORS, OMISSIONS OR NEGLIGENCE OF THE CITY, CITY EMPLOYEES, THIRD PARTIES, MYSELF, OR OTHER PARTICIPANTS OR PARK VISITORS. I HEREBY WAIVE ALL CLAIMS, RELEASE, INDEMNIFY, DEFEND AND HOLD HARMLESS THE CITY, OFFICIALS, AGENTS AND EMPLOYEES, IN BOTH THEIR PRIVATE AND PUBLIC CAPACITIES, FROM ANY AND ALL LIABILITY, CLAIMS, SUITS, DEMANDS, OR CAUSES OF ACTION WHICH MAY ARISE FROM MY PRESENCE AT AND USE OF THE FLYING FIELD IN ANY MANNER.

FURTHER, I, ON BEHALF OF MYSELF, AND MY HEIRS, EXECUTORS, ADMINISTRATORS AND ASSIGNS, FOREVER RELEASE AND DISCHARGE ANY AND ALL RIGHTS, DEMANDS, CLAIMS AND CAUSES OF SUIT OR ACTION, KNOWN OR UNKNOWN, WHETHER ARISING NOW OR IN THE FUTURE, THAT I MAY HAVE AGAINST THE CITY, FOR ANY AND ALL INJURIES, INCLUDING DEATH AND PROPERTY DAMAGE IN ANY MANNER ARISING OR RESULTING FROM MY PARTICIPATION IN THE PROJECT. I HEREBY AFFIRMATIVELY STATE THAT I HAVE CAREFULLY READ THIS RELEASE, KNOW THE CONTENTS OF THE RELEASE AND SIGNED THE RELEASE OF MY OWN FREE WILL.

FURTHER, I AGREE TO COMPLY WITH ALL CITY AND PARK RULES AND REGULATIONS, INCLUDING FLYING FIELD OPERATIONAL AND SAFETY RULES ESTABLISHED BY THE PARKS AND RECREATION DIRECTOR OR DESIGNEE.

I CERTIFY THAT I UNDERSTAND ALL PROVISIONS HEREIN, AND FURTHER CERTIFY ALL INFORMATION PROVIDED ON THIS APPLICATION AND ANY DOCUMENTATION SUBMITTED TO THE CITY IS TRUE AND COMPLETE. I UNDERSTAND THAT FALSIFICATION OR SIGNIFICANT OMISSIONS OF ANY INFORMATION MAY BE CONSIDERED JUSTIFICATION FOR NON-ACCEPTANCE, DENIAL OR REVOCATION OF USE PRIVILEGES AT ANY TIME.

PRINT NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_