## RELEASE AND WAIVER OF LIABILITY AGREEMENT TOWN OF STANFORD

I, \_\_\_\_\_\_ ("Participant"), acknowledge that I have voluntarily applied to the Town of Stanford (the "Town") to participate in the following Town activities:

Haunted Fortress of Stanford 2023 – Cleaning, building, setting up, acting, and more activities

(Description of activities, which Participant will engage in)

I AM AWARE THAT THESE ACTIVITIES ARE HAZARDOUS ACTIVITIES AND THAT I COULD BE SERIOUSLY INJURED OR EVEN KILLED. I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED, AND AGREE TO ASSUME ANY AND ALL RISKS OF BODILY INJURY, DEATH OR PROPERTY DAMAGE, WHETHER THOSE RISKS ARE KNOWN OR UNKNOWN. I verify this statement by placing my initials here:\_\_\_\_\_\_ Parent or Guardian's initials (if under 18):\_\_\_\_\_\_

As consideration for being permitted by the Town to participate in these activities and use the Town's premises and facilities, I forever release the Town, any Town affiliated organization, and their respective elected officials, directors, officers, employees, volunteers, agents, contractors, and representatives (collectively "Releasees") from any and all actions, claims, or demands that I, my assignees, heirs, distributees, parents, guardians, next of kin, spouse and legal representatives now have, or may have in the future, for injury, death, or property damage, related to or arising out of (i) my participation in these activities, (ii) the negligence or other acts, whether directly connected to these activities or not, and however caused, by any Releasee, or (iii) the condition of the premises where these activities occur, whether or not I am then participating in the activities.

I also agree that I, my assignees, heirs, distributees, parents, guardians, next of kin, spouse and legal representatives will not make a claim against, sue, or attach the property of any Release in connection with any of the matters covered by the foregoing release. I acknowledge that I will receive no remuneration for my participation.

## I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE TOWN, AND SIGN IT OF MY OWN FREE WILL.

Date: \_\_\_\_\_. 20\_\_\_

(Participant's signature)

(Address)

## IF YOU ARE UNDER 18 YEARS OF AGE, YOUR PARENT OR GUARDIAN MUST INITIAL AND SIGN THIS FORM AS INDICATED:

Signature by Parent or Guardian: I verify that the dangers of the activities and the significance of this Release and Waiver were explained to me and the Participant and that the Participant and I understand and agree to them.

Date: \_\_\_\_\_, 20\_\_\_

(Parent's/Guardian's signature)