

Release of Liability for Volunteer Clean-Up at Various County Riverbanks

ADULTS

I, _____
PRINT NAME

acknowledge that I choose to participate in the Riverbank Clean-Up on Saturday, October 8, 2011 from 9 A.M. to 12 PM (or an alternate date/time during 2011).

OR

MINORS

I, _____ hereby
PRINT GUARDIAN'S NAME

authorize my child _____
PRINT CHILD'S NAME and AGE

to participate in the Riverbank Clean-up to be held on Saturday, October 8, 2011 (or an alternate date/time during 2011). **I understand that Broome County and its representatives will provide no supervision of my child of any kind or nature and that I am fully responsible for my child's actions.**

I accept full responsibility for my own/my child's actions and understand that there are hazards associated with this activity, both known and unknown, which may incur injury and/or death, traveling to, participating and/or playing in, and/or traveling from said riverbank clean-up project. I release from liability all family, friends, employees, significant others, associates and/or Broome County by myself, family, friends, associates and/or legal representatives. The Undersigned agrees to hold the County of Broome and any officer, employee and/or agent thereof free and harmless from any and all loss(es), penalty(ies), damages, settlement(s), cost(s), charge(s), professional fee(s) or other expense(s) or liability(ies) of every kind arising from or relating to any and all claim(s), lien(s), demand(s), obligation(s), action(s), proceedings or causes of action of any kind in connection with, or arising directly or indirectly from the undersigned or the child of the undersigned participating in the riverbank clean-up project.

Without limiting the generality of the foregoing, the undersigned covenants that any and all such claims, etc., relating to personal injury, death, damage to property, or any actual or alleged violation of any applicable statute, ordinance, administrative order, executive order, rule or regulation, or decree of any court of competent jurisdiction in connection with, or arising directly or indirectly from, errors and/or negligent acts by the County of Broome and any officer, employee and/or agent, as aforesaid, shall be included in the aforesaid release.

I confirm that I am cognizant that this agreement is legal and binding between myself and all the parties aforementioned.

Volunteer/Guardian Print Name

Volunteer/Guardian Sign Name

Date