

Waiver of liability and hold harmless agreement in favor of Forsyth County, Georgia

In consideration of being allowed to participate in FCPR Natural Resource Division Activities, and for other good and valuable consideration exchanged, I, the undersigned hereby agree to the following:

Waiver - I, the undersigned, assume all risks and hazards incidental to participation, including transportation to and from these activities and do hereby, for myself, participant, my heir, executors, and administrators, waive, release, absolve, indemnify and agree to hold harmless the Forsyth County Government, Forsyth County Parks and Recreation Department and its representatives, sponsors, affiliated associations, organizers, officers, officials and participants for any and all damages suffered by myself or participant in connection with this activity. Also, I agree that I will abide by all the rules and policies outlined in the National Rules and set by the Forsyth County Parks & Recreation Department.

Hold Harmless - I hold the "Releasees" harmless and indemnify them against all actions or claims (including reasonable attorneys' fees, judgments and costs) with respect to any injuries, death, or other damages or losses, resulting from my participation in the Activities.

Pictures - I agree that any pictures or videos taken of me or my children/dependents during the Activities may be used by the Releasees for future promotional campaigns. These pictures or videos may be used for such promotional campaigns without permission and with no promise of benefit or gain to the volunteer.

I UNDERSTAND THIS ACTIVITY IS OFFERED FOR RECREATIONAL PURPOSES. THEREFORE, THE PROVISIONS OF THE RECREATIONAL PROPERTY ACT OF O.C.G.A. § 51-3-20 *ET SEQ.* APPLY.

I UNDERSTAND AND AGREE WITH THE CONTENTS OF THIS DOCUMENT. ANY QUESTIONS I MAY HAVE HAD ABOUT THIS DOCUMENT WERE ANSWERED TO MY SATISFACTION AND I HAD AN OPPORTUNITY FOR AN ATTORNEY OF MY CHOOSING TO REVIEW SAME. IN CONSIDERATION OF THE "RELEASEES" ALLOWING ME TO PARTICIPATE IN THIS ACTIVITY OR EVENT, AND FOR OTHER CONSIDERATION RECEIVED, I HEREBY AGREE TO THE ABOVE AS EVIDENCED BY MY SIGNATURE AFFIXED BELOW:

Participant's Printed Name

Parent's Printed Name
(if participant is under 18)

Participant Signature

Parent Signature

Address: _____

Phone Number: _____

Email: _____

Date: _____

Emergency Contact with phone number: _____