

**CITY OF EAGLE LAKE PARKS AND RECREATIONS DEPARTMENT
VOLUNTARY WAIVER OF LIABILITY AGREEMENT**

(This Document Affects Your Legal Rights. Read Carefully Before Signing)

I wish to participate in “**3 on 3 Basketball and/or Street Hockey**” (the “Activity”).

The 3 on 3 basketball and hockey programming being offered is for recreational purposes only and is not structured to be competitive.

I state and affirm that:

1. My participation is voluntary. No one is forcing me to participate.
2. I acknowledge the Activity is NOT an ESSENTIAL service provided by the City.
3. I understand and acknowledge the Activity I am about to voluntarily engage in as a participant has certain risks. I understand these risks known or unknown, anticipated, or unanticipated may result in injury, death, illness, disease or damage to myself or my property, or to other persons and their property.

Risks might include bruises, cuts, sprains, strains, head injuries and broken bones.

4. In consideration of being allowed to participate in this Activity, I hereby personally assume all risks in connection with this Activity and I hereby agree to hold the City, its officials, employees, agents, and contractors harmless and I waive any right to make claims or bring lawsuits against the City or anyone working on behalf of the City for any injuries or damages related to the alleged negligence of the City.
5. This waiver does not apply to any injuries or damages that are the result of any willful, wanton, or intentional misconduct by the City or anyone acting on behalf of the City.
6. I understand that entering into and signing this agreement affects my legal rights and result in my giving up or waiving certain legal rights, and I accept this and sign this agreement of my own free will.
7. The terms of this agreement shall bind the members of my family, if I am alive, and my heirs, assigns and personal representatives if I am deceased.
8. My signature indicates I have read this entire document, understand it completely, acknowledge that it cannot be modified or changed in any way by oral representations, and agree to be bound by its terms.

Name _____ Date(s) of Activity _____
(Please Print Full Name)

Address: _____

City

State

Zip Code

Signature

Date

Notice: If participant is under 18 years old or has a legal guardian, this release must be co-signed by a parent or guardian.

I certify that I am the parent or legal guardian of the above individual and hereby consent to his or her participation in the Activity. I have read and understand the above Volunteer Waiver of Liability Agreement and I agree to be bound by the terms stated therein.

Name of Parent/Guardian (Please Print)

Signature of Parent/Guardian

Date