



The Woodlands Township

The Woodlands, TX

Volunteer Registration

Contact Information

Name	
Cell Phone	
Village of Residence	
E-Mail Address	
Emergency Contact	
Emergency Contact Phone #	

WAIVER AND RELEASE FORM

In consideration of being allowed to participate in any way in any program, activity or event, (referred to herein as the "Program") sponsored by, performed by, or in any way involving The Woodlands Township, I, as Participant, or if Participant is a minor, as parent or guardian of the minor Participant (herein referred to as "I"), and intending to be legally bound do hereby acknowledge and agree to the following:

1. I hereby verify that I am in good physical health and able to participate in and/or complete the Program.
2. INDEMNIFICATION, ASSUMPTION OF RISK, WAIVER OF LIABILITY AND RELEASE:

I UNDERSTAND THAT THERE ARE INHERENT DANGERS, HAZARDS, AND RISKS OF INJURY OR DAMAGE INVOLVED IN USING THE TOWNSHIP'S PREMISES, EQUIPMENT, FACILITIES, SERVICES, DURING TOWNSHIP-OWNED OR SPONSORED ACTIVITIES, EVENTS AND/OR PROGRAMS, TO INCLUDE VOLUNTEER PROGRAMS. I UNDERSTAND THAT SPECIFIC RISKS VARY FROM ONE ACTIVITY OR PROGRAM TO ANOTHER AND RANGE FROM MINOR INJURIES TO MAJOR INJURIES, SUCH AS CATASTROPHIC INJURIES INCLUDING DEATH. IN CONSIDERATION OF MY PARTICIPATION IN THE PROGRAMS/ACTIVITIES OR EVENTS OFFERED BY OR AT THE TOWNSHIP, I UNDERSTAND AND VOLUNTARILY ACCEPT THESE RISKS, WHICH MAY BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE TOWNSHIP, OTHER PARTICIPANTS, GUESTS, OR THIRD PARTIES. I AGREE THAT THE TOWNSHIP, ITS OFFICERS, EMPLOYEES OR SUCCESSORS, WILL NOT BE LIABLE FOR ANY INJURY, INCLUDING, WITHOUT LIMITATION, PERSONAL, BODILY, OR MENTAL INJURY, ECONOMIC LOSS OR ANY DAMAGE TO ME, MY GUEST(S), MINOR CHILDREN, PARENTS, NEXT OF KIN, PERSONAL REPRESENTATIVES, HEIRS OR ASSIGNS RESULTING FROM ANY NEGLIGENCE (INCLUDING GROSS NEGLIGENCE) OF THE TOWNSHIP, ANYONE ACTING ON THE TOWNSHIP'S BEHALF OR ANYONE ELSE USING AND/OR ATTENDING AND/OR PARTICIPATING IN THE PROGRAM/EVENT/ACTIVITY AND/OR SERVICES, WHETHER OR NOT THEIR ATTENDANCE OR PARTICIPATION IS RELATED TO THE TOWNSHIP PROGRAM/ACTIVITY/EVENT. (INITIAL).

I ALSO AGREE TO INDEMNIFY THE TOWNSHIP AND HOLD THE TOWNSHIP FREE AND HARMLESS FROM ALL CLAIMS FOR PERSONAL INJURIES, INCLUDING DEATH, AND ALL PROPERTY DAMAGE, INCLUDING DAMAGES ALLEGED TO HAVE BEEN CAUSED BY MY, THE TOWNSHIP'S OR A THIRD

PARTY'S NEGLIGENCE OR GROSS NEGLIGENCE, REGARDLESS OF WHO FILES A CLAIM. I UNDERSTAND THAT I AM INDEMNIFYING THE TOWNSHIP FROM ANY AND ALL CLAIMS ARISING FROM MYSELF OR THIRD PARTIES, TO INCLUDE ALL REASONABLE FEES (INCLUDING ATTORNEYS' FEES), COSTS AND EXPENSES THE TOWNSHIP INCURS TO DEFEND ITSELF FROM SUCH NEGLIGENCE CLAIM(S).

3. I have read and fully understand this Waiver and Release. I further understand that by participating in the Event/Activity or Program, I/we will have waived substantial rights.

4. I have knowingly and voluntarily agreed to this Waiver and Release.

FOR PARENTS OF PARTICIPANTS UNDER THE AGE OF 18:

I verify that the minor participant(s) is/are in good physical health and able to participate in and/or complete the following program(s), activity or event. INITIAL HERE _____

MEDIA/PHOTO WAIVER:

The Township may take and use photos of participants for publicity purposes. Photos of participants are used in the Township's activity guide and other media publications. I hereby grant The Woodlands Township permission to use my or my minor child's likeness, name, voice and words in any broadcast, telecast or print media account of this event, activity or program free of charge. INITIAL HERE _____

Printed Name of Participant

Adopt-a-Path 2019

Program/Event

IF MINOR - Signature of Participant, Parent or Legal Guardian

Date

IF MINOR - Signature of Participant, Parent or Legal Guardian

Date

IF MINOR - Signature of Participant, Parent or Legal Guardian

Date

IF MINOR - Signature of Participant, Parent or Legal Guardian

Date