

****** READ CAREFULLY ******

**WAIVER AND RELEASE OF LIABILITY FOR MINORS
Russellville Recreation and Parks Department Sports Program**

I hereby grant permission for my child, _____, to participate in the Recreation and Parks Department athletic/sports program, related events and activities, and I the undersigned acknowledges, appreciates, and agrees that: 1. The risk of injury to my child from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and, 2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my child's participation; and 3. My child willingly agrees to comply with the stated and customary terms and conditions for participation. If they observe any unusual significant hazard during their presence or participation, they will remove themselves from participation and bring such to the attention of the nearest official immediately; and, 4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE THE RUSSELLVILLE RECREATION AND PARKS DEPARTMENT, their officers, officials, agents, and/or employees, other participants, WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE. 5. I, for myself and on behalf of my heirs, assigns, personal representatives, and next of kin HEREBY INDEMNIFY AND HOLD HARMLESS all the above releasees from any and all liabilities incident to my child's involvement or participation in these programs EVEN IF ARISING FROM THEIR NEGLIGENCE. 6. If any one numbered part of this release is declared void, such declaration of that numbered part will not void the rest of the parts of the release. I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT INDUCEMENT

Child's Name (Print) _____ Age _____

Child's Signature _____

Parent or Guardian Name (Print) _____

Parent's Signature _____ Date _____