


ASSUMPTION OF RISK AND LIABILITY

I, the undersigned, acknowledge that in consideration of my involvement in _____

(herein referred to as "the Activity"), that I, for myself, my personal representatives, heirs, next of kin, spouse and assigns, do hereby:

1. **RELEASE, DISCHARGE AND COVENANT NOT TO SUE THE CITY OF TUSTIN, ITS EMPLOYEES, OFFICERS, COUNCILMEMBERS AND AGENTS** (hereinafter collectively as the "the City") for and from any and all claims and liability arising out of strict liability, dangerous condition of public property and/or ordinary negligence which may cause injury, death, damages or property damage to myself. I hereby agree to indemnify and hold the City harmless for and from any claim, judgment or expense the City may incur which may arise out of my participation in the Activity.
2. Acknowledge that the Activity is inherently dangerous and that I participate at my own risk. I further understand that the Activity contains risks of minor injuries, serious injuries and even death, and that other participants in the Activity pose a danger to me. Nevertheless, **I VOLUNTARILY ELECT TO ACCEPT ALL RISKS** connected with my participation in the activity.

 _____ **(Initials)**

3. Acknowledge that no oral representations or inducements have been made to me to sign this Agreement. If any portion of this Agreement is held invalid, it is agreed that the balance thereof shall continue in full legal force and effect.
4. Agree that this Agreement shall apply to any incident, accident, injury or death occurring during my participation in the activity.

I HAVE READ THIS DOCUMENT. I UNDERSTAND THAT IT IS A RELEASE OF ALL CLAIMS.

 _____ **(Initials)**

This agreement is intended to be binding on myself, my heirs, personal representatives, next of kin, spouse and assigns.

I VOLUNTARILY SIGN MY NAME EVIDENCING MY ACCEPTANCE OF THE ABOVE PROVISIONS.

 **Dated:** _____

Applicants Name (Print) _____

Signature of Applicant _____

In case of emergency, provide us with the name and telephone number of someone we can contact.

Emergency Contact Name: _____ **Phone:** _____