

# Lake Metroparks Archery Release Form

FORM MUST BE FILLED OUT IN ORDER TO PARTICIPATE IN THE ARCHERY PROGRAM

## Personal Information

Name: \_\_\_\_\_

Phone Number(Emergency)\_\_\_\_\_

Street Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

## Disclaimer and Release

The organization/individual agrees to indemnify and save harmless Lake Metroparks, its officials, its agents and employees against and from any and all claims by or on behalf of any person or persons, firm or firms, corporation or corporations, arising from the conduct of or management about the demised premises, or from any accidents in or on the demised premises, and will further indemnify and save Lake Metroparks harmless against and from any and all claims arising from any breach or default on the part of the organization in the performance of any covenant or agreement on the part of the organization to be performed pursuant to the terms of this agreement, or arising from any act or negligence of the organization, or any of its agents, contractors, servants, employees or licensees, and from and against all costs, counsel fees, expenses and liabilities incurred in or about any such claim or action proceeding brought thereon; and in case any action or proceeding be brought against Lake Metroparks by reason of any such claim, the organization upon notice from Lake Metroparks covenants to resist or defend at organization/individual's expense such action or proceeding by counsel reasonably satisfactory to Lake Metroparks.

I HAVE READ FULLY AND UNDERSTAND THE ABOVE RELEASE/WAIVER AND FULLY UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING THIS WAIVER VOLUNTARILY.

Parents or guardians must sign if applicant in UNDER 18

Parent/Guardian Name (Printed): \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_