

## The City of Ashford, AL Special Events Waiver

## THIS FORM MUST BE COMPLETED BEFORE THE EVENT WILL BE ALLOWED

Name:		
Address:		City/State/Zip
Phone #:	Phone #:	
Type of Event:		÷
Date & hours of event:		_
AGREEMENT, WAIVER AND RELEASE A	AND/OR HOLD HARMLESS	
City of Ashford, AL facilities, I hereby waiv injury, death or property damage which I may in activities at said facilities. This release is it employees, and agents from any and all liabit activities at this or any other City of Ashford, carelessness on the part of those parties. It is involve an element of risk and danger of act further agreed that this waiver, release and as indemnify and to hold harmless, the City of Ashdamage, cost or expense which they may incut to others; or any injury or property damage that City of Ashford, AL facility.	have, or which may hereafter accrue to mentended to discharge in advance the City dility arising out of or connected in any we, AL facility even though that liability may understood that activities such as the one cidents and knowing those risks, I here sumption of risk is to be binding on my lashford, AL, its officers, employees and agur as the result of any injury caused by m	ns for damage for personal e, as a result of participation of Ashford, AL, its officers, ay with my participation in y arise out of negligence or es I will be participating in by assume those risks. It is neirs and assigns. I agree to ents from any loss, liability, y reckless or negligent acts
I HAVE CAREFULLY READ THIS AGREE ITS CONTENTS. I AM AWARE THAT THIS MYSELF AND THE CITY OF ASHFORD A	S IS A RELEASE OF LIABILITY AND A	CONTRACT BETWEEN
Signature		Date