





RELEASE AND WAIVER OF LIABILITY AGREEMENT

I,  _____ (“Participant”), acknowledge that I have voluntarily applied to participate in the  2023 Local Author Event at Merced County Library [“Event”].

I AM AWARE OF THE RISKS AND HAZARDS CONNECTED WITH THE EVENT AND THAT THESE ACTIVITIES ARE OR CAN BE HAZARDOUS AND THAT I COULD BE SERIOUSLY INJURED OR EVEN KILLED. I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED TO MY PROPERTY AND ME, AND AGREE TO ASSUME ANY AND ALL RISKS OF LOSS, BODILY INJURY, DEATH OR PROPERTY DAMAGE, WHETHER THOSE RISKS ARE KNOWN OR UNKNOWN, REGARDLESS WHETHER SUCH LOSS IS CAUSED BY THE NEGLIGENCE OF THE RELESSEES, OR OTHERWISE.



I verify this statement by placing my initials here:  _____

Parent or Guardian’s initials (if under 18):  _____

As consideration for being permitted to participate in these activities and use the County premises and facilities, I forever release the County of Merced and their respective directors, officers, employees, volunteers, agents, contractors, and representatives (collectively “Releasees”) from any and all actions, claims, or demands that I, my assignees, heirs, distributes, guardians, next of kin, spouse and legal representatives now have, or may have in the future, for injury, death, or property damage, loss or theft of personal property, assets, cash or funds, related to (1) my participation in the event, (2) the negligence or other acts, whether directly connected to these activities or not, and however caused, by and Releasee, or (3) the condition of the premises where these activities occur, whether or not I am then participating in the activities. I, my assignees, heirs, distributes, guardians, next of kin, spouse and legal representatives will not make a claim against, sue or attach the property of any Releasee in connection with any of the matters covered by foregoing release.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE COUNTY OF MERCED AND SIGN IT OF MY OWN FREE WILL.

If Signed by Parent or Guardian: I verify that the dangers of the activities and the significance of this Release and Waiver were explained to the Participant and that the Participant understood them.

Executed at  _____, California, on  _____, _____.
City Month Date Year

PARTICIPANT/RELEASOR

 _____

Signature

Address: _____

Phone No.: _____

PARENT OR GUARDIAN

 _____

Signature

Address: _____

Phone No.: _____

IF YOU ARE UNDER 18 YEARS OF AGE, YOU AND YOUR PARENT OR GUARDIAN MUST SIGN AND INITIAL THIS FORM WHERE INDICATED