

## RELEASE OF LIABILITY

## **RELEASE OF LIABILITY**

In consideration of gaining membership or otherwise being allowed to use the Lenexa Rec Center ("Facility") and/or participate in the activities or programs occurring at said Facility, I (if over 18), the undersigned, Participant/Parent/Guardian, understand and agree that the City of Lenexa, Kansas, is not and shall not be responsible for or liable for any illness or injury to person or for loss of or damage to property that I (or the participant, if a minor) may suffer as a result of the use of the Facility and/or participation in said activities or programs. I hereby forever release and hold harmless the City of Lenexa, Kansas, its employees, agents and representatives from any and all claims of any kind that I, or my respective heirs, executors, administrators or assigns, may have or claim to have resulting from the use of the Facility or participation in said activities or programs. I recognize that there are inherent risks and dangers in the activities that I will take part in. I expressly agree to accept and assume all such risks existing in said activities, including risks of injury. I acknowledge that I have been urged and advised to seek the advice of a physician before I (or the participant) use the Facility or participate in any activity or program occurring at the Facility.

## PHOTO/VIDEO RELEASE

I, the undersigned, consent and authorize the City of Lenexa, Kansas, to use at its discretion any photograph(s) or video(s) taken of me (or the participant, if a minor) while participating in said activities and waive any and all claims that I (or the participant, if a minor) may have resulting from any use of such photograph(s) or video(s).

By signing this Release of Liability and Photo/Video Release, I certify that I am at least 18 years of age and that I have carefully read the same and fully understand all aspects of said releases. Parent/Guardian Birthdate Parent/Guardian Name Zip Code Address City State Parent/Guardian Contact Phone Number Parent/Guardian E-mail Address Participant Name Participant Name Participant Birthdate Participant Name Participant Birthdate Participant Name Date Signed Parent/Guardian Signature

REVISED 8/18/2017

FOR INTERNAL USE ONLY Entered By: \_\_\_\_\_\_ Date: \_\_\_\_\_