

**TOWN OF MANGONIA PARK
 PARENTAL AND PARTICIPANT APPROVAL AND AGREEMENT
 FOR PARTICIPATION IN EVENTS AND PROGRAM(S)
 TO BE CONDUCTED AT TOWN HALL**

Participant Name:	Program:	Date:
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PARTICIPANT:

I am aware that the above named program, to be conducted at the Town of Mangonia Park Town Hall can be a dangerous activity involving RISKS OF INJURY. I understand that the risks involved in participating in this program may include, but are not limited to death, or serious injuries or impairment to my body, general health and well being.

I recognize the importance of following directors' and/or instructors' and/or coaches' (as applicable) directions regarding activities, rules, regulations, procedures, etc. and I do agree to obey all such directions.

I hereby, expressly assume all risks associated with participation in the above named program and agree to hold the Town of Mangonia Park, its employees, representatives, coaches, volunteers and agents, harmless from any and all liability, actions, causes of action, debts, claims, or demands of any kind and nature, whatsoever, which may arise by or in connection with my participation in activities related to the above named program to be conducted at the Town of Mangonia Park Town Hall.

I further understand and agree that the Town assumes no responsibility whatsoever for any property I or my child/ward may bring into the Mangonia Park Town Hall. The Town is hereby expressly released and discharged from any and all liabilities for any loss, injury or damage to such property that may be sustained by reason of the use and occupancy of the Town of Mangonia Park Town Hall by myself and/or my child/ward under this Agreement.

 Signature of Participant

 Date

PARENT/LEGAL GUARDIAN (for participation by minors)

I, _____, am the parent/legal guardian of _____ (my child/ward). I understand that the above named program, to be conducted at the Town of Mangonia Park Town Hall can be a dangerous activity involving RISKS OF INJURY. I understand that the risks involved in participating in this program may include, but are not limited to death, or serious injuries or impairment to the body, general health and well being of my child/ward.

I hereby agree to allow my child/ward to participate in the above named program, to be conducted at the Town of Mangonia Park Town Hall. I also agree to hold the Town of Mangonia Park, its employees, agents, representatives, coaches, and volunteers harmless from any and all liability, actions, causes of action, debts, claims, or demands of any kind and nature, whatsoever, which may arise by or in connection with my child/ward's participating in activities related to the above named program, to be conducted at the Town of Mangonia Park Town Hall. The terms hereof shall serve as a release for my heirs, estate, executor, administrator, assignees, and for all members of my family.

I have read the foregoing and understand and will abide by all of the terms, conditions, principles and regulations contained herein.

Date _____

 Signature of Parent/Legal Guardian

Date _____

 Signature of Participant

Acknowledgment in the Presence of:

(SEAL)

 Notary Public
 My Commission Expires: