



Archery Liability Release Waiver

This is a release of liability waiver- Please read this waiver before signing.

Note: This form must be read and signed before the participant is permitted to take part in any City archery event or use the City archery range.

PARTICIPANT'S NAME _____

Date: _____

Address _____

In consideration of being permitted to participate in the City of Green Isle archery range within the City of Green Isle, I acknowledge, appreciate, and agree that:

1. The risk of injury from the activity and equipment involved in archery or archery tag is potentially significant, including the potential for permanent disability and death, and while particular safety practices, supervision and personal discipline will minimize this risk, the risk of serious injury does exist;
2. To the best of my knowledge, I have no physical or medical condition that would prevent me from participating in the Activity.
3. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of those persons released from liability below, assume full responsibility for my participation, will also follow the General Range Safety Regulations and General Rules and Regulations that are outline in the City of Green Isle Ordinance; and,
4. I understand that the activities of archery are potentially dangerous. If I observe any criminal conduct, I will bring such to the attention of the Sibley County Sheriff's Department as soon as possible; and,
5. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release and hold harmless City of Green Isle, the owners and lessors of the premises used to conduct the archery activities, their officers, officials, agents and/or employees ("Releasees"), with respect to any and all injury, disability, death, or loss or damage to person or property, whether caused by the negligence of the releasees or otherwise.
6. In consideration of being allowed to participate in the Activity, I understand and agree that neither the City nor any person acting on behalf of the City, may be held liable in any way for any event which occurs in connection with this Activity which may result in harm, death, injury or other damage to me. This waiver of liability does not waive liability for any injuries that I obtain as the result of willful, wanton, or intentional misconduct by the City or any person acting on behalf of the City.
7. I understand and agree that this Release of Liability Waiver Agreement covers each and every archery activity and event in which I participate at the City of Green Isle hereafter.

8. It is my express intent that this Waiver and Release shall bind the members of my family, if I am alive, and my heirs, assigns and personal representatives if I am deceased.
9. I grant permission for the use of any photographs, motion pictures, recording, or any other record of my participation in this event for any legitimate purpose, without financial or other compensation or royalties.
10. If any court finds any portion of this Waiver and Release of Liability to be contrary to law, invalid, or unenforceable, the remainder of the Waiver and Release of Liability will remain in full force and effect.

I have read the above and understand the legal significance of signing this document.

Name (Please Print)

Street Address

Signature

City, State, Zip

Date

NOTICE: Participants under eighteen (18) years of age must have this waiver and release co-signed by their parent or legal guardian.

I certify that I am the parent or legal guardian of the above individual and hereby consent to his or her participation in the Activity. I have read and understand the above waiver and release of liability and I agree to be bound by the terms stated therein.

Parent/Guardian Signature

Date