

CROOKSVILLE EXEMPTED VILLAGE SCHOOL DISTRICT

WAIVER, CONSENT AND RELEASE FORM DURING
BUILDING/PROPERTY/EQUIPMENT USE
(Participation in non-school events/activities for adults)

Participant's Name: _____ Phone Number: _____

Address: _____ City: _____ State: _____ Zip: _____

Nature of Event/Activity: _____

In exchange for the agreement of the Crooksville Exempted Village School District, Board of Education
("Board") to permit _____ (the "Participant") to participate in _____,
(the "event/activity") or use of _____ on _____, the undersigned:

1. waives, releases, and agrees to hold harmless and indemnify the Board, its individual members, employees and agents from any an all liability, arising from negligence or otherwise, and damages as a result of your participation in the event/activity or use of the above facility, including, but not limited to, property damage, bodily, personal or mental injury, including death, or other injury;
2. acknowledges it is the sole responsibility of the undersigned to evaluate carefully the risks inherent in participation in the event/activity or use or the facility, including, without limitation, dangers posed by willful or negligent conduct by you the participant and/or by others and voluntarily assumes full responsibility for, and full risk of, property damage, bodily, mental or personal injury, including death, or other injury relating to your participation in the event/activity;
3. promise, on behalf of participant, not to sue the Board or its individual members, employees, or agents for actions or omission arising from the event/activity or use of the above facility;
and
4. agrees to abide by the rules governing the event/activity or use of the above facility.

The undersigned has read the above carefully, understands its significance, and voluntarily agree to all of its terms.

Participant's Signature

Date

Approval must be obtained from the Building Principal, Athletic Director or Supervisors of the activity prior to use of the facilities and/or equipment.

Approved: Yes _____ No _____

District Rep. Signature

Date

Note: All required signatures must be completed and this Release properly returned before you can participate in the event/activity. Original is to be returned to the Crooksville Schools Treasurer's Office.