

CONSENT FOR PARTICIPATION

I volunteer that I am physically fit and have sufficiently trained for participation in these activities and have not been advised otherwise by a qualified medical professional. I do voluntarily accept and solely assume all risks of injury associated with my participation in these events.

By my signature below, I hereby agree to hold harmless and indemnify the (Library), their officers, servants, agents and employees from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage or injury that may be sustained by my participation.

Participant Signature

Date

Participant Printed Name