

2021 Liability Waiver

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Onslow County Parks and Recreation

Participation Waiver

In consideration of being permitted to participate in events and activities (collectively, "Activities") provided and facilitated by Onslow County, by and through the Onslow County Parks and Recreation Department ("Facilitator"), I hereby agree:

I understand the risks and completely assume all risks, known and unknown, of participating in Activities, including the risk of death or serious bodily injury. I represent that I am physically able to participate in the Activities and do not have any physical illness, injury or disability that would make my participation in these Activities unwise or unnecessarily risky or dangerous to myself or others.

I accept and assume all such inherent dangers and risks of bodily injury, permanent disability, death, and/or property damage, even if caused, in whole or in part by/but not limited to, the negligence of the Facilitator and all of their respective members, managers, staff, shareholders, affiliated organizations and entities, representatives and sponsors, agents and employees (collectively the "Facilitator Parties"). Recognizing the possibility of death and serious bodily injury associated with participating in the Activities, I, on behalf of myself, my agents, personal representatives, heirs, successors, executors, administrators, and assigns hereby agree to waive, release, hold harmless and/or discharge the Facilitator Parties from any and all claims, demands, damages, attorney fees and costs, losses, injuries, liabilities, obligations or expenses of any kind which are made or could be made by me, or on my behalf, in suits of law or equity, as a result of my participation in the Activities, even though such claims may arise due to the negligence, carelessness or recklessness of such Facilitator Parties.

This release and waiver of claims is binding on me, my heirs, executors, administrators, legal representatives, assigns and successors in interest. I understand that I am giving up my right to sue the Facilitator Parties and giving up other valuable and substantial rights in exchange for being permitted to participate in the Activities.

I agree and understand that following all instructions and rules at all times while on the premises is a requirement for participation. I agree that if I fail to follow such instructions and rules and act responsibly, I waive any and all rights to continue participating in the Activities and any benefits associated with them.

By signing this release, I agree that I have read the terms, agree to be bound by the terms and do so voluntarily and knowingly. If I am signing on behalf of my minor child, I hereby execute this Release on behalf of my minor child with a full and complete understanding that I am executing a release and waiver of potential claims on behalf of my minor child and myself.

Name (Required): _____
Name of Participant

Age (Required): _____
Age of Participant

Signature of Participant/Guradian (Required): _____