## SOUTHERN LANCASTER COUNTY FARMER-SPORTSMEN'S ASSOCIATION (SLCFSA)

## RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT ("AGREEMENT")

## \*\*READ BEFORE SIGNING\*\*

Are you the guest of a SLCFSA member? Circle Member's Name:		-	name and memership Number:	=
Which activity are you participating in?				
In consideration of participating in the above SLCFS qualified to participate in such activity, and in good h activity conditions are unsafe, I will immediately disc the SLCFSA staff.	ealth and appropriate	e physical condition. I a	cknowledge that	if I believe the
I fully understand that this activity involves risks of so may be caused by my own actions, or inactions, and/o takes place, or the negligence of the "Releasees" nam foreseeable at this time; and I fully accept and assume result of my participation in the activity.	or those of others par ned below; and that the	ticipating in the activity, here may be other risks e	the conditions i ither not known	n which the activity to me or not readily
I hereby release, discharge, and covenant not to sue S ASSOCIATION and its respective administrators, dir advertisers, and if applicable, lessors of premises on v from all liability, claims, demands, losses, or damage negligence of the "Releasees" or otherwise, including waiver of liability, and assumption of risk, I, or anyor INDEMNIFY, SAVE AND HOLD HARMLESS eadamage, or cost which any Releasee may incur as the	rectors, agents, office which the activity tak s on my account caus g negligent rescue op- ne on my behalf, mak ach of the releasees f	ers, volunteers, employee tes place, (each consider sed or alleged to be causterations; and I further ag tes a claim against any of from any loss, litigation of	es, other participated one of the "Red in whole or in the tree that if, despife the Releasees,"	ants, any sponsors, eleasees" herein) a part by the te the release, I WILL
I have read this RELEASE AND WAIVER OF LI understand that I have given up substantial rights by sany nature. I intend it to be a complete and unconditional any portion of this Agreement is held to be invalid, the	signing it and have si onal release of all lia	gned it freely and without bility to the greatest extend	at any inducement ant allowed by la	nt or assurance of w and agree that if
Printed name of Adult Participant:				
If applicable, printed name of Minor child(ren) partic	ipant(s) and their age	e, and your relationship t	o them:	
Signature of Adult Participant (not required for minor	rs):			
Address of Adult Participant	City	State	Zip Code	Date
PARENTAL CONSENT (REQUIRED FOR PAR	TICIPANTS UNDE	R THE AGE OF 18)		
I, the above minor's parent and/or legal guardian, und and capabilities and believe the minor to be qualified and AGREE TO INDEMNIFY AND SAVE AND HO losses, or damages on the minor's account, caused or Releasees or otherwise, including negligent rescue op assumption of risk, I, the minor, or anyone on the min INDEMNIFY, SAVE AND HOLD HARMLESS eadamage, or cost any Releasee may incur as the result fully upon entrance to my majority, throughout the results.	to participate in such OLD HARMLESS earlieged to have been berations. Further, I anor's behalf makes a ach of the Releasees of any such claim. T	activity. I hereby release ach of the Releasees from caused, in whole or in pagree that if, despite this claim against any of the from any litigation expe	se, discharge, con all liability, classer, by the neglique release and waive above Releasees and storney fee	venant not to sue aims, demands, gence of the ver of liability, and s, I WILL es, loss, liability,
Printed Name of Minor's Parent/Legal Guardian	Signature of Minor	Signature of Minor's Parent/Legal Guardian		