DISTRICT OF COLUMBIA DEPARTMENT OF PARKS AND RECREATION
CONSENT AND WAIVER AND RELEASE OF LIABILITY FORM
FOR PARTICIPATING IN DPR ACTIVITY

Name of Activity, Event, or Program (hereinafter, the "Activity"): **DPR January 2019 Fun Day**

Date(s) of Activity: **January 23, 2019**

Location of Activity: _____

I, _____, the parent/legal guardian of _____ ("Participant"), hereby consent and give permission for participant in the above named program or activity.

I recognize that participation in the Activity can carry with it potential risks, including, but not limited to, bodily injury and I assume all risks of participating in the Activity including, but not limited to, any risks that may arise from the equipment and/or real and personal property owned, managed, maintained, and/or controlled by the District at the location of the Activity.

In consideration of permission to participate in this Activity, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors and assigns as follows:

(A) **I WAIVE, RELEASE, AND DISCHARGE** any and all District officials, agents and employees, current and former, and/or representatives (each a "District Party" collectively the "District Parties" or the "District") from any and all liabilities, claims, penalties, suits, demands, judgments, costs, interest, and expenses (including, attorneys' fees and costs) (each a "Loss" and collectively "Losses") including, but not limited to, Losses from or connected to participant's death, disability, personal injury, loss damage or theft of participant's property or actions which may occur to participant in connection with the Activity arising from either the participant or the District's negligence, or from participant's recklessness or intentional acts;

(B) **I AGREE TO INDEMNIFY and HOLD HARMLESS** the District, for, from, and against any and all losses arising or resulting from participation in or travel to and from this Activity arising from either the participant or the District's negligence, and/or from participant's recklessness or intentional acts;

(C) **THIS WAIVER, RELEASE AND DISCHARGE, AND INDEMNIFICATION SHALL NOT EXTEND TO** the gross negligence or intentional acts of District Parties acting within the scope of their employment.

In the event of an injury to the participant requiring medical attention, I grant permission to the District to attend to the participant. In the event of an injury that requires further medical attention or in an emergency, the District will attempt to contact the names listed below and simultaneously seek further medical treatment for the participant. I agree to accept full responsibility for and to pay the cost of medical care, transportation, and any other incidental expenses arising from the injury.

In the event that the participant is unable to participate in a particular Activity for reasons of health, accident, failure to comply with directions of the leaders in charge, violations of the code of conduct, or for any other reason in the District's reasonable determination, I agree to pick up the participant from a site convenient to the District.

I certify that I have read this contract and that I fully understand its content and that I am the participant's true parent or legal guardian and that I have the authority to sign this document, and that the information below is true and correct.

_____ _____
Signature of Parent/Legal Guardian Date

_____
Print Telephone Number and Address of Parent/Legal Guardian

_____
Emergency Contact Name(s) and Phone Number(s)

*Please provide information about any accommodations needed for any disabilities:

_____

DPR Fun Day Jan '19