**Participant Release/Assumption of Risk Agreement - Agreement to Indemnify & Hold Harmless**

Each person signing below understands that participation in the Town of (“Carrabassett Valleys”) program, activity and/or special event can involve the risk of damage, illness (including communicable diseases such as MRSA, influenza and COVID-19), and injury, including permanent disability and death, to both people and property, and while particular rules, equipment and personal discipline may reduce these risks, the risks do exist.

Each person signing below understands and agrees that the Town of Carrabassett Valley its agents, officers and employees, accept no responsibility, and will not be liable, for any injury, illness, harm or damage to his/her person or property (including, but not limited to, injury, illness, harm or damage caused by negligence of the Town of Carrabassett Valley, its agents, officers or employees) occurring during or arising out of participation in any Town program, activity and/or special event.

To the fullest extent permitted by law, each person signing below agrees to assume all risk of injury, illness, harm or damage to his/her person or property arising during or in connection with said Town program, activity and/or special event.

Each person signing below hereby releases and agrees to indemnify and hold harmless the Town, its agents, officers and employees, from any and all liability, actions, damages and claims of any kind and nature whatsoever for any injury, illness, harm or damage to his/her person or property (including, but not limited to, injury, illness, harm or damage caused by negligence of the Town, its agents, officers or employees) that may arise or occur during or in connection with said program, activity and/or special event.

Each person signing below hereby grants the Town of Carrabassett Valley consent to record, videotape and photograph his/her or their child’s image and/or voice (collectively “digital media”) to be used with or without his/her or their name(s) and for any lawful purpose, including, for example, such purposes as publicity, illustration, advertising, and web-based publications, all without compensation.

ADULT PARTICIPANT PRINTED NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OR YOUTH PARTICIPANT PRINTED NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADULT SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_

PERMANENT RESIDENCE: \_\_\_\_

CONTACT TELEPONE NUMBER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY/TOWN: STATE: ZIP: \_\_\_\_

PERSON TO CONTACT IN CASE OF AN EMERGENCY: \_\_\_\_

RELATIONSHIP: PHONE: \_\_\_