

**Winter Indoor Walking
at Phillip Exeter Academy Field House**

ASSUMPTION OF THE RISK AND WAIVER OF LIABILITY

In consideration of being permitted, at my specific request, for me or my child/ward to participate in the activities of the Town of Exeter, New Hampshire Park and Recreation Department, we HEREBY RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO SUE the Town of Exeter, its officers, employees, School Department and agents, individually or in an official capacity for the Town, as well as Phillips Exeter Academy, together with its officers, trustees, employees, and insurers (all for purposes herein also referred to as "Releasees") from all liabilities, claims, actions, damages, costs or expenses which we may have against any of the Releasees arising out of or in any way connected to participation in the activity, including, travel to or from the activity, for bodily injury, death or property damage suffered by me/my child/ward before, during, or after said activity. I understand that this release and waiver includes any claim or action based on the negligence, action, or inaction of any Releasee or otherwise. I HEREBY ASSUME FULL RESPONSIBILITY FOR ALL RISK OF INJURY OR PROPERTY DAMAGE due to the negligence of Releasees or otherwise while engaged in or as a result of the activity. In addition, I give my permission for the child(ren) to be treated by qualified medical personnel in the event that the parent/guardian named below can not be reached at the phone numbers provided. All Parks & Recreation Department classes/events may be photographed. Participants may be photographed for Town of Exeter programs and promotions. I also hereby grant the sponsor & co-sponsor the unconditional right to use the name, voice, and photographic likeness in connection with any of their audio/video productions, articles, or press releases but not as an endorsement. We likewise release from the responsibility of staff transporting the releasor to and from the activity. I realize the department reserves the right to add or change regulations in the best interest of the releasees and their respective staff

By signing this document below, you understand and agree to the above terms and conditions.

I AGREE TO THE ABOVE RELEASE: _____ / _____ / _____
date

Participant's Name: _____ (Please Print)

Participant Signature: _____