



Release & Hold Harmless Agreement

EVENT/ACTIVITY: _____

BRANCH: _____

DATE: _____

I agree (and/or for my minor child/children/or ward(s) named below) that in consideration for and as a condition of the right to participate in this activity, I shall forever release and hold Cuyahoga County Public Library, its officers and employees, harmless from any and all claims for damages, costs, or expenses for personal injuries and/or death (including but not limited to allergic reactions, burns or poisoning) or for damage or loss of personal property, occurring as a result of my participation, and/or the participation of my child/children/or ward(s) named below, in the activities associated with the above-named event/activity.

I further acknowledge on behalf of myself, and my minor child/children/or ward(s), that Cuyahoga County Public Library no way represents or warrants that the activities and the products to be used in this event/activity are safe or healthful. I fully assume the risk that some or all of the activities may be dangerous and that products to be used in this event/activity may cause allergic reactions or other adverse health effects in myself, my minor child/children/or ward(s), and that either could result in personal injury (including death) or property damage and I will in no way hold Cuyahoga County Public Library, its officers and employees, responsible for these risks.

Signature

Printed Name

Address

PARENTAL PERMISSION:

I represent that I am the parent/guardian (circle one) of the following minor child/children/or ward(s) participating in the above-indicated event and that I am at least 18 years of age:

Child's Name

Relationship to Child

Address

Signature

Printed Name

FOR STAFF USE ONLY: Send a copy to Youth/Adult Services. Keep a copy for your records.