



TEAM: _____

OAK RIDGE RECREATION & PARKS ROSTER FORM AND MEDICAL RELEASE

The applicant/organizer, on behalf of the organization, covenants to save, defend, hold harmless and indemnify the City, and all of its officers, departments, agencies, agents and employees (Collectively the "City") from and against any and all claims, losses, damages, injuries, fines, penalties, costs (including court costs and attorney's fees), charges, liability, or exposure, however caused, resulting from, arising out of, or in any way connected with the applicant's event or activity.

The applicant/organizer has put in place preventative measures to reduce the spread of COVID-19 which have been reviewed and approved by the City. These preventative measures may require periodic updates as more is learned about best practices in the prevention of the spread of COVID-19. The applicant/organizer agrees to comply with all COVID-19 safety protocols required by the City as a condition of approval of the event/activity. Compliance with the guidelines minimizes the risk of exposure to COVID-19 but cannot eliminate the potential for exposure. If any participant has a compromised immune system or is in any way considered to be at higher risk for infection we do not recommend participation in this activity at this time. By signing this agreement, the applicant/organizer acknowledges the contagious nature of COVID-19 and voluntarily assume all risk that participants may be exposed to or infected by COVID-19 by participation in recreational programming and that such exposure may result in personal injury, illness, permanent disability or death.

I do hereby acknowledge that I have received a copy of, read and understand the terms of this release. I agree to abide by all City rules and policies established by the City for participation in recreational activities on City property.

PARTICIPANT'S NAME	BIRTHDATE	ADDRESS	PARTICIPANT'S SIGNATURE
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