



2024 ADULT FITNESS CLASS WAIVER

Derry Parks & Recreation Department



Name:

Address:

Town: State: Zip Code:

Home Phone: Cell Phone:

Email:

Birth Date: Age: Gender:

Are you a Veteran or the Spouse/Family member of a Veteran? YES NO

Do you have any Medical or Health Restrictions? YES NO

If YES, please describe them here: _____

Emergency contact information - please do not leave this information blank

Name: _____ Relation: _____

Home Phone: _____ Cell/Work Phone: _____

WAIVER TO PARTICIPATE

LEGAL STATEMENT AND GENERAL RELEASE AND INDEMNIFICATION

I, the Legal consenting adult/Custodian of minor/Legal Guardian of participant (further referred to as participant) do hereby provide my acknowledgment and consent to voluntarily participating in the Derry Parks & Recreation Department program, event, and/or activity. I acknowledge that participation is voluntary and may expose any participant to risks of personal injury or death resulting from such participation and the use of materials and equipment, and the exposure to harm such as may be presented by the COVID-19 virus. I am aware and acknowledge that the novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization, is extremely contagious, and is believed to be spread mainly from person-to-person contact. While the Town of Derry New Hampshire Parks and Recreation department has created new protocols and put in place preventative measures in an effort to reduce the spread of COVID-19, I acknowledge that the Town of Derry New Hampshire Parks and Recreation Department cannot guarantee that a participant will not become infected with COVID-19, and I acknowledge that attending any park, facility, program, or activity may increase the participant's risk of contracting COVID-19.

On behalf of the participant, I also agree to forever release the Town of Derry, and all of their employees, agents, officials, board members, volunteers and also any and all individuals and organizations assisting or participating in programs of the Parks and Recreation Department ("the Releasees") from any and all claims, rights of action and causes of action that may have arisen in the past, or may arise in the future, directly or indirectly, from personal injuries to or death of the participant or property damage resulting from my (our) participation in the Town of Derry's voluntary programs in the Parks and Recreation Division.

On behalf of the participant, I also promise, to indemnify, defend and hold harmless the Releasees against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, arising directly or indirectly from my (our) participation in the Town of Derry's voluntary programs in its Parks and Recreation Division. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the Town of Derry, its employees, agents, and representatives, whether any injury, harm, death, or damage, including but not limited to exposure to or infection by the COVID-19 virus, occurs before, during, or after participation in any capacity with Town of

Derry, New Hampshire. I further affirm that I have read this Consent and Release Form and that I understand the contents of this document. I understand that participation in these programs is voluntary and that as participants, I (we) are free to choose not to participate in said programs. By participating, I affirm that I have decided to participate in these programs with full knowledge that the Releasees will not be liable to anyone for personal injuries and property damage, including exposure to and infection by the COVID-19 virus, which I (we) could suffer from by participating in these programs.

I give permission and consent to allow photographs to be taken during program session activities and events. I further give permission and consent that any such photographs may be published (in print or media) and used by the Town of Derry and its agents, to illustrate and promote the program experience.

EMERGENCY RELEASE WAIVER AND ACKNOWLEDGMENT

I, the Legal consenting adult/Custodian of minor/Legal Guardian of participant (further referred to as participant), provide consent to take part in all activities related to the Town of Derry Parks & Recreation Department. I, do hereby authorize the program directors and/or instructors as Agents for the consent to contact medical services in the case of an emergency. In giving such permission, I acknowledge and affirm the risks, releases, and indemnification obligations as outlined above with respect to personal injury or death or damage to property resulting from the use of materials and equipment and the exposure to harm such as may be presented by the COVID-19 virus.

ADDITIONAL NOTICE WAIVER

Participation in this sport/activity may involve risk of injury. As a parent/guardian/participant I am aware of these hazards and of the ability to participate. In consideration for participation in this program, I hereby for myself, my heirs, executors, and administrators waive and release all rights and claims against the Town of Derry, Derry School District, its officers, employees, agents, volunteers, supervisors from all losses, injury, damages, fees, and other expenses, arising out of or in connection with participation in the activity/sport. The above named cannot be responsible for any aggravation or injury caused as a result of pre-existing physical disabilities; including but not limited to allergies. The Parks & Recreation Department will be notified of any such special needs or sensitivities in writing prior to enrollment in this such program.

Participant Signature

Date