

Release Form Hold Harmless for Borough of Matawan:

I understand that I am participating at my own risk. I agree to hold harmless the Borough of MATAWAN or authorized agents for any injury that I may suffer by participation in any of the programs offered through the Senior Center. This means that you are releasing the Borough of Matawan, or its authorized agents from any liability for any injury that you suffer as a result of participating in activities sponsored by the Borough of Matawan. By signing this form, you are voluntarily and freely giving up your rights to sue the Borough of Matawan, or its authorized agents. Further, by signing this waiver, you acknowledge that you do so voluntarily and of your own free will. You further acknowledge that you have capacity to enter into this agreement releasing the Borough of Matawan from its liability. You further understand and agree that your signature on this waiver applies not only to any events listed in the waiver but to any and all events from this forward in which you participate that are sponsored by the Borough of Matawan. By executing this waiver, you release the Borough of Matawan, or its agents not only from any items listed in this form but from any activities or events that you participate in, in the future. This includes all classes, presentations, trips, senior citizens club meetings, etc. Medical Release I hereby release, waive and agree to hold harmless the Borough of Matawan, its employees, contractors, associates, departments or other entities or individuals representing the same, with regard to any accidents, illness or personal injury I may suffer, which might result from my participation in any activity or program listed below offered by the Borough of Matawan. I am aware that it is my responsibility to check with my doctor before beginning any type of activity offered by the Borough of Matawan. The Borough of Matawan has advised me that a physician's approval is strongly recommended prior to beginning any exercise program that is offered by the Borough of Matawan. I acknowledge I have no mental or physical condition that might compromise my ability to participate in the activities which have not been disclosed to the Borough of Matawan and I am fully capable of participating in these activities without causing harm to myself or others.

Print Name: _____

Sign: _____ Date: _____