CITY OF PHOENIX – WAIVER AND RELEASE OF CLAIMS

Name of Activity Here:	Includes Motor Vehicle Transportation
Ple	ase Read Carefully
child, my heirs and assigns, agree to waive, release of action against the City of Phoenix, its officers, or damage caused or alleged to be caused in wheans that I will not make any claims against or a	participate in the above listed activity, I hereby for myself, my ase and forever discharge any and all claims, rights and causes officials, employees, agents and volunteers (the "City"), for injury ole or in part by the negligence of the City. I understand that this sue the City of Phoenix, its agents or employees, for injuries or e that this means I will not recover any money from the City of damage sustained by me or my child.
regarding facilities and equipment maintenance,	enix may include, but is not limited to, acts or failure to act field design, construction, instructions of City personnel, of medical or emergency medical assistance, inattention, and environment.
running; sliding; exposure to bodily fluids, infection materials used in the activity; striking or being structure condition of the land or building where the activity	sed by any of the following: falling; tripping; being pushed; on or disease; bodily reactions to insect or animal bites, food or uck by another individual; equipment used in the activity; a y is located; drowning; criminal acts of known or unknown a motor vehicle accident; and other similar acts, incidents or
The type of injuries may range from minor injuries	s and fractures to paralysis, brain damage and death.
	r and release of all claims is intended to be as broad and any portion of this waiver is held invalid, I agree that the
with my child's or my own participation in this act activity. I (or my child) have the necessary degre choose. I do not expect the City to coach, manage	ease. I understand and voluntarily assume all risks associated ivity. I (or my child) am physically capable of participating in this see of skill, training, experience or ability to participate at the level lege, instruct or train me (or my child). I understand that the City and that there would be a increase in the activity fee if the City
I state that I have carefully read and fully underst I have voluntarily signed below.	and the meaning of this waiver and release of all claims, and that
Print/Type Participant Name	Today's Date
Participant's Address	
Participant's Signature	
	ER THE AGE OF EIGHTEEN (18) YEARS: e child identified above. I understand and agree to the above bound by its terms, for myself and on behalf of the claim named
Child's Date of Birth	Today's Date
Print/Type Parent/Guardian's Name	
	Parent/Guardian's Signature