

Release of Liability- 2016 Mayor's Walk for Senior Wellness

I _____ (print name of individual who will be participating), and my assignees, executors, administrators, heirs and successors, do hereby agree to release, hold harmless, and forever discharge from any liability, the City of Jacksonville, Florida, as well as its officials, officers, employees and agents, for any claims, demands, causes of actions, judgments (including costs and expenses) or liability arising directly or indirectly from damages, bodily injury or death that I might sustain as a result of my voluntary participation in the 2016 Mayor's Walk for Senior Wellness.

I, the undersigned, do hereby acknowledge and understand that there are risks inherent in my participation in such a walk for senior wellness, and I assume all risks inherent therein and I agree to accept all responsibility for any injuries sustained by me as a result of my participation. I further acknowledge that I have been advised by the City of Jacksonville that I should consult with a physician or health care provider prior to engaging in the 2016 Mayor's Walk for Senior Wellness to assure that I am physically able to participate.

I fully understand and acknowledge that by executing this release I, together with my assignees, executors, administrators, heirs and successors, forever discharge any claims for liability or negligence against the City of Jacksonville, as well as its officials, officers, employees and agents, for damages, bodily injury or death that I might sustain as a result of my voluntary participation in the 2016 Mayor's Walk for Senior Wellness and any such claims will be forever barred.

I further acknowledge and understand that my participation in the City of Jacksonville's 2016 Mayor's Walk for Senior Wellness is entirely voluntary and not something I am required to do. I further acknowledge that during my participation in the 2016 Mayor's Walk for Senior Wellness that I will not be acting in the course and scope of employment with the City of Jacksonville but that I am participating on my own time.

Further, I grant full permission to any and all of the foregoing to use my likeness for any promotional purposes related to the event or for future events.

I have fully read and understand the aforementioned release or liability and agree to its terms. All terms of this agreement are contained herein and there are no other terms to this agreement.

Print Name (Participant)

Date

Signature of Participant

Participant's Address