



## RECYCLE A BICYCLE PROGRAM PARTICIPATION AND RELEASE AGREEMENT

**Please read this form carefully before signing. By signing, you are waiving your right to sue the City of Meridian (“City”).**

In consideration of my participation in Recycle a Bicycle (“Program”), and intending to be legally bound, do agree that:

I am voluntarily participating in the Program. I acknowledge that my participation in the Program carries risks, some of which are unknown, and with that knowledge I do assume all known and unknown risks and hazards of my participation in the Program.

I understand that I am and will be solely responsible for any expense I may incur due to any injury or illness to myself or to others resulting from or related to my participation in the Program, including, without limitation, medical expenses or lost wages

I acknowledge that my participation in the Program will include physical activity of varying degrees of rigorosity.

I recognize that it is my sole responsibility to verify my physical condition with a physician prior to my participation in the Program.

I acknowledge that my participation in the Program may include the use of City equipment and facilities. I assume sole responsibility for any and all injuries to myself or to others, or damage to property, incurred in the course of my use of equipment and facilities owned by City that is not attributable to the tortious conduct of City. I will clearly communicate any concerns I may develop about my ability to safely use such equipment and facilities.

Upon completion of the event, I acknowledge that I will become the sole owner of the bicycle that I helped to repair and that I will be solely responsible and liable for any injuries I experience, or injuries or damage I may cause, or expense that I may incur related to its ownership.

On behalf of myself, my heirs, executors, administrators, assigns, and personal representatives, I hereby forever indemnify, release and forever hold City harmless from any and all real or possible losses, claims, actions, judgments for damages, expenses, harm or injury to myself, to other persons, and/or to property incurred in relation to my participation in the Program not attributable to the tortious conduct of City, regardless of the manner by which such claim may be brought.

I have had time to read and understand all of the above conditions and terms. My signature below signifies that I consent to these terms and wish to participate in the Program.

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name of Participant if a Minor: \_\_\_\_\_

Signature of guardian if participant is a minor: \_\_\_\_\_ Date: \_\_\_\_\_