



Liability Release Form

Clive Festival Water Slide

Print Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Phone \_\_\_\_\_

I hereby agree to indemnify and hold harmless the City of Clive, its agents, commissioners, officers, volunteers, and employees ("Released Parties") from any and all liability for personal injuries or damages I may hereafter sustain while participating in the water slide sponsored by the Clive Firefighters Association whether such personal injuries or damages are caused by negligent of the Released Parties of otherwise, to the full extent permitted by law. I understand that there are inherent risks in participating in this activity. I also give my permission for any photos/videos of the participant taken during the activity to be used for future department promotional materials. The individual listed on the release form has my permission to participate in this activity.

Participant or Parent/Guardian (if minor) \_\_\_\_\_ Date \_\_\_\_\_

(Signature Required)