

# Mid Ohio Chapter of NAVHDA Waiver and Release of Liability

1. By signing this Waiver and Release of liability (Agreement), I waive and release Mid Ohio Chapter of NAVHDA its agents, servants, employees, insurers, successors and assignees from any and all claims, demands, causes of action, damages or suits at law and equity of any kind, including but not limited to claims for personal injury, property damage, medical expenses, loss of services, on account of or in any way related to or growing out of my presence or involvement at the facility.

This waiver and release is intended to and does release Mid Ohio Chapter of NAVHDA from any and all liability for damages or injuries on account of or in any way related to or growing out of my negligence, the negligence of third parties and Mid Ohio Chapter of NAVHDA negligence. This is not intended to release Mid Ohio Chapter of NAVHDA from any liability resulting from their intentional conduct.

I further covenant and agree not to institute any claims or legal action against Mid Ohio Chapter of NAVHDA for any claim released by this Agreement. I further agree that should any claim be made against Mid Ohio Chapter of NAVHDA in contravention of this Agreement, including but not limited to derivative claims, I will protect, defend and completely indemnify (reimburse) Mid Ohio Chapter of NAVHDA for any such claim and expenses including attorney's fees and costs incurred by Mid Ohio Chapter of NAVHDA in defending themselves or security indemnity hereunder.

2. I understand that Mid Ohio Chapter of NAVHDA is not responsible for any lost, stolen, or damaged valuables or property.

I have read the Agreement and understand that by signing the Agreement I have consented to be bound by its terms, including the waiver/release of any legal right I may have to sue Mid Ohio Chapter of NAVHDA for any costs they incur because a claim or legal action is brought in violation of this Agreement. I agree any violation of the Agreement and its terms and conditions, as determined by Mid Ohio Chapter of NAVHDA, will void and terminate this Agreement and may result in loss of the ability to use the facility.

I am signing this Agreement freely, voluntarily and competently and am at least eighteen (18) years of age.

Name (please print) \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

This release covers all minor children of the same immediate family. Print names of minor children below.

_____	_____	,	_____	_____
_____	_____	,	_____	_____
_____	_____	,	_____	_____
_____	_____	,	_____	_____

If the Participant is under 18, the Parent or Legal Guardian must also sign.

\_\_\_\_\_  
Signature of Guardian and relationship

\_\_\_\_\_  
Date