



PEMBROKE SCHOOL DEPARTMENT

RELEASE OF ALL CLAIMS AND LIABILITIES

I, _____, of _____, _____,
name address town/city
 _____, hereby certify by participating in _____, that I am cognizant of
state activity

all the inherent risks and dangers of this activity and of the basic safety rules connected with the same. I further recognize that this activity is not encouraged, sponsored or supervised by the Town of Pembroke or the Pembroke School Committee or any of their agents or employees. I also recognize that the Town of Pembroke and the Pembroke School Committee do not supply any of the equipment related to this activity and that I am responsible for the safety and good operating condition of any and all equipment used by me regardless of where I obtained it. I also assume all responsibility for my physical and mental fitness and capability to perform all of the physical and mental demands associated with my participation in the above program and/or activity. I know the risks and dangers involved in this activity, and that unanticipated and unexpected dangers may arise, and I assume any and all risks of injury to my person and property that may be sustained in connection with the stated and associated activities, in and about the premises of the Pembroke Public Schools.

In consideration of the permission granted to me to enter the premises of the Pembroke Public Schools in order to participate in the above-stated activity, I do hereby for myself, my heirs, administrators and assigns, release, remise and discharge the Town of Pembroke and the Pembroke School Committee and all of the officers, agents, and employees, of and from any and all lawsuits, claims, demands, damages, liabilities and causes of action of any sort, specifically including but not hereby limited to any and all claims or causes of action due to negligence or any other fault, or connected with the maintenance of any equipment, playing court or field, building or other premises owned by the Town of Pembroke, and/or claims regarding injuries caused by other persons, however each or any of such claims or causes of action may be denominated or described, for any and all injuries (including death) sustained by my person and/or property during my presence on said premises and participation in the above-stated program or activity.

I hereby represent and certify that my true age is stated below, and if I am under the age of 21 years, I do represent and certify that I have the permission of my parents and/or guardians to participate in the activity stated above, and that they have full knowledge thereof **and fully join in all aspects of this release as set forth above** as evidenced by their signature(s) below. I further certify that my attendance and participation in the above program or activity is voluntary and that no oral representations, statements or inducements with respect to the above program or activity have been made to me by the Town of Pembroke, the Pembroke School Committee, or any of their officers, agents or employees.

I/WE HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I/WE ARE AWARE THAT THIS IS A FULL RELEASE OF LIABILITY AND I/WE HAVE SIGNED IT OF MY/OUR OWN FREE WILL.

 Age of Participant

 Signature of Participant

Signature(s) of Parent(s)/Guardian(s):

 Father/Guardian

Date: _____

 Mother/Guardian