Town of Winchendon ROAD RACE WAIVER AND RELEASE OF LIABILITY



EVENT NAME:
EVENT LOCATION(Route):
EVENT DATE(S):

I UNDERSTAND AND ACKNOWLEDGE, that participation in a road race or similar charitable activity involves risk and the potential for injury. I understand that running on and in public ways containing motor vehicle traffic involves risk of injury to any and all parts of my body. I hereby certify that I am aware that I will be placing myself in a potentially hazardous traffic situation and that I will have limited or no assistance of law enforcement traffic control at various locations along the route.

For myself, my heirs, executors, administrators, legal representatives, assignees, and successors in interest (collectively the "releasing Party or Successors"), I expressly **WAIVE**, **RELEASE** and **DISCHARGE** the Town of Winchendon, their officers, agents and employees or any other person from any and all LIABILITY for any death, disability, personal injury, property damage, property theft or actions, including any alleged or actual negligent act or omissions, regardless of whether such act or omission is active or passive which may accrue to myself or members of my organization/group or our heirs in connection with our participation in the above described event.

I expressly **INDEMNIFY AND HOLD HARMLESS** the Town of Winchendon, their elected and appointed officers, agents and employees from any and all liabilities or claims made by me or my organization/group, my/our heirs and any other individuals or entities as a result of any of my/our actions in connection with my/our participation in this event except for those claims arising from the sole negligence or sole willful misconduct of the Town, their officers, employees, volunteers or other representatives. Such indemnification includes liability settlements, damage awards, costs and attorney fees associated with any such claims.

I hereby certify that I have read this document and understand its content.

DATE: ______

SIGNATURE: _____

NAME: _____

(Please Print)

ADDRESS: _____