

RELEASE

RELEASE executed on _____, by _____
Minor Releaser, and _____ his/her parent or guardian, Parent/Guardian
Releaser, City of Pierce Township, County of Clermont, State of Ohio.

_____, Minor Releaser, and _____,
Parent/Guardian Releaser, hereby acknowledge that we have voluntarily applied to participate
in _____ (activity) at Pierce Township, Clermont County, Ohio.

WE ARE AWARE THAT _____ (activity) IS STRENUOUS EXERCISE ACTIVITY
AND WE ARE VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE
RISK OF PHYSICAL INJURY OR DEATH.

In consideration for being permitted by Pierce Township, Clermont County, Ohio, to
participate in _____ (activity) conducted by _____ (coach)
and use of Pierce Township property and /or facilities, I for myself, and _____
(parent/guardian) hereby release Pierce Township, its Trustees and employees from any
present and/or future claims, including negligence, for property damage, personal injury to
Minor Releaser or wrongful death to Minor Releaser arising from my participation in
_____ (activity).

Minor Releaser and Parent/Guardian Releaser hereby assume full responsibility for the
risk of bodily injury, death or property damage due to the negligence of Pierce Township, its
Trustees and/or employees.

Minor Releaser and Parent/Guardian Releaser agree that this release and waiver
agreement is intended to be as broad and inclusive as permitted by the laws of the State of
Ohio.

WE, MINOR RELASER AND PARENT/GUARDIAN RELEASER HAVE READ THIS FORM
AND FULLY UNDERSTAND THAT BY SIGNING THIS FORM WE ARE GIVING UP LEGAL RIGHTS
AND/OR REMEDIES WHICH MAY BE AVAILABLE TO US.

IN WITNESS WHEREOF, Releaser has executed this Release at Pierce Township,
Clermont County, Ohio.

Witness

Minor Releaser

Witness

Parent/Guardian Release