

WAIVER OF LIABILITY

Name of Parent or Guardian of Child Participant: \_\_\_\_\_

Name of Child Participant: \_\_\_\_\_

I expressly agree to hold Runyon Field Sports Complex, its directors, officers, agents and assigns harmless from any loss, injury or liability that may arise through or as a participant in the Instructional Training Videos sponsored and hosted by the Runyon Field Sports Complex.

I hereby agree to hold the Runyon Field Sports Complex harmless for the use of my child's name, picture or story for the purpose of an instructional training video. I hereby freely release the Runyon Field Sports Complex for any claim or liability involved with information published or printed for public information; and

**1)** Release and forever discharge and hold harmless Pueblo County and the Runyon Sports Complex Commission, Inc. and their agents from any and all liability, claims and demands, of whatever kind or nature, either in law or equity, which arise or may arise from the undersigned or his/her children participating in any activities on the premises.

**2)** Indemnify and to hold Pueblo County and the Runyon Sports Complex Commission, Inc. and their agents harmless from any and all claims, suits, expenses, damages or other liabilities, including reasonable attorney fees and court costs arising out of damage or injury to persons or property caused or sustained by any person, persons, or entities as a result of any intentional or negligent act or omission by Participant or failure of Participant. By requiring this right to indemnification, the County in no way waives or intends to waive the immunity protections provided to Pueblo County and its employees under the Colorado Governmental Immunity Act, C.R.S. § 24-10-101, et seq.

I further agree that this release, waiver and indemnity agreement is intended to be as broad and inclusive as permitted by the laws of the State of Colorado, and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full force and effect.

I have read this release, understand the terms used in it and their legal significance, and have executed it voluntarily.

\_\_\_\_\_  
Signature of Parent or Guardian of Child Participant

Date: \_\_\_\_\_

\_\_\_\_\_  
Emergency Contact Name and Phone Number

Team Name: \_\_\_\_\_

Age Division: \_\_\_\_\_