TEAM NAME: _____ (REQUIRED)

Please indicate the season: ❑ Winter ❑ Summer ❑ Fall
Please indicate the league: ❑ Coed Softball ❑ Slow Pitch ❑ Fast Pitch
❑ Basketball ❑ Volleyball

RELEASE AND ASSUMPTION OF THE RISK AGREEMENT FOR PARTICIPATION IN THE CITY OF BURBANK'S ADULT SPORTS PROGRAM

For and in consideration of participation in the City of Burbank's Park, Recreation and Community Services Sports Program (hereafter "Program"), I hereby voluntarily release, discharge, waive and relinquish any and all actions or causes of action for any personal injury, property damage or wrongful death against the City of Burbank and/or any of its officers, agents, servants or employees, occurring to me as a result of my participation in the Program or any activities incidental thereto wherever or however the same may occur and for whatever period said activities may continue.

TO THE MAXIMUM EXTENT ALLOWED BY LAW, IT IS MY INTENTION BY SIGNING THIS INSTRUMENT, TO EXEMPT AND RELIEVE THE CITY OF BUARBANK, ITS OFFICERS, AGAENTS, SERVANTS OR EMPLOYEES FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE INCLUDING, BUT NOT LIMITED TO, THE EXISTENCE OF ANY FIELD CONDITION(S) ALLEGED TO BE DANGEROUS AS A MATTER OF LAW. I am fully aware of the risks and hazards inherent in participation in the Program and I certify that I am in good physical health and able to participate in sports activities. I realize that NO MEDICAL INSURANCE IS PROVIDED BY THE CITY OF BURBANK FOR ANY INJURIES THAT MAY OCCUR TO ME DURING PARTICIPATION IN THE PROGRAM. Nevertheless, I hereby elect voluntarily to participate in the Program and assume all risk of loss, damage, or injury that may be sustained by me during my participation in the Program or any activities incidental thereto.

I understand that this Release and Assumption of the Risk shall apply not only to me but also to my heirs, executors, administrators, next of kin, assigns and successors.

I ACKNOWLEDGE THAT I HAVE READ THIS DOCUMENT AND HAVE BEEN FULLY AND COMPLETELY ADVISED OF THE POTENTIAL DANGERS INCIDENTAL TO PARTICIPATIONTHE PROGRAM AND I AM FULLY AWARE OF THE LEGAL CONSEQUENCES OF SIGNING THIS INSTRUMENT. By my signature below, I hereby certify that I am at least eighteen (18) years old. **If I am under the age of eighteen (18), then I acknowledge that I must obtain a Release and Assumption of Risk form for minors in the Sports Office.**

DATED: _____ _____
Signature

Print Name: _____