

**RELEASE, HOLD HARMLESS  
& AGREEMENT NOT TO SUE**

I, \_\_\_\_\_ fully understand that my participation in Settlers Days in Deer Park, Washington, exposes me to the risk of personal injury, death or property damage. I hereby acknowledge that I am voluntarily participating in this event/class and agree to assume any such risks.

I hereby release, discharge and agree not to sue the Tri County Settlers Association, Deer Park Ambulance and/or the City of Deer Park for any injury, death or damage to or loss of personal property arising out of, or in connection with, my participation in the event/class from whatever cause, including the active or passive negligence of Deer Park Ambulance and/or the City of Deer Park or any other participants in the event/class.

In consideration for being permitted to participate in the event/class, I hereby agree, for myself, my heirs, administrators, executors and assigns, that I shall indemnify and hold harmless Deer Park Ambulance and/or the City of Deer Park from any and all claims, demands, actions or suits arising out of or in connection with my participation in this event/class.

I HAVE CAREFULLY READ THIS RELEASE, HOLD HARMLESS & AGREEMENT NOT TO SUE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT IT IS A FULL RELEASE OF ALL LIABILITY AND SIGN IT OF MY OWN FREE WILL.

\*This agreement has to be signed by every individual in a group participating in the event/class.

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

\* \_\_\_\_\_ \*

\_\_\_\_\_  
(Print participant's name)

\_\_\_\_\_  
(Participant's signature)

\* \_\_\_\_\_  
(Print parent or guardian's name)

\* \_\_\_\_\_  
(Parent/guardian signature)