



CITY OF CHINO EMPLOYEES WAIVER RELEASE FORM 2017



(Please print neatly or type.)

ALL INFORMATION MUST BE COMPLETED TO PARTICIPATE

Please (✓) one: Employee Spouse/Partner Retiree Official Contractor

Athlete's Name: _____ Best Contact Number: _____

Home Address: _____

City: _____ Zip Code: _____

Date of Birth: _____ Gender: Male Female

(All participants must be 18 years of age.)

Company Name: _____ Work Number: _____

Department: _____ Title: _____

In exchange for being permitted to participate in any City of Chino activity and/or to use any City of Chino facility and/or any non-City facility, I acknowledge and attest to the fact that:

1. My participation is voluntary.
2. My participation potentially can result in injury, death, property damage, and other losses.
3. I am legally competent to understand and accept the associated risks.
4. I will not pursue legal actions against the City for matters arising as a result of my participation.
5. I am responsible for payment of all charges associated with my participation, for any damages to the City property or other losses of any involved.
6. I will defend the City and its representatives against any claims or lawsuits that are a result of my participation.
7. I agree that the City can take photographs and/or film me, while participating in a City activity and/or at a City facility to be used for promotional purposes; and further, that these will be the sole property of the City.
8. I understand that rates, fees, dates, times, classes, schedule of classes, and instructors established by the City may change at any time without notice.
9. I agree that City fliers and class schedules are not an expressed or implied contract.
10. I agree that the City is not responsible for any damage or loss that may arise from a misunderstanding, error, or omission.
11. I understand that the City reserves the right to change or cancel any or all of the participation/use rules at any time.
12. I understand that any individual behaving inappropriately or unsafely will be ejected and denied future participation.

I understand that I may participate in Chino Corporate Challenge on off work hours. Time spent participating in Chino Corporate Challenge is not compensated for and cannot be shown as time worked on my timesheet. The City of Chino is not liable for the payment of Workers' Compensation benefits or other monetary compensation for any loss which arises out of my participation whether I am an employee of the City or a family member.

The Corporate Challenge program is provided for entertainment and employee wellness purposes only and attendance/participation is strictly voluntary.

I am signing a full release of any and all liability against the City of Chino and do so of my own free will.

Participant's Signature _____
Date