



PROGRAM TITLE

Program Date _____

Participant Name: _____

Participant Address: _____

Participant Phone Number: _____

Emergency Contact: _____

Phone Number _____ **Alternate Phone Number** _____

Relationship _____

LIABILITY RELEASE FORM

On this _____ day of _____, 2017, intending to be legally bound hereby, the undersigned agrees and does hereby release from liability and to indemnify and hold harmless the City of Altoona and Altoona Public Library, and any of its employees or agents representing or related to the City or the Committee as regards to the _____. This release is for any and all liability for personal injuries (including death), attorney fees and property losses or damage occasioned by, or in connection with any activity or accommodations for this event. The undersigned further agrees to abide by all the rules and regulations promulgated by the City of Altoona and/or Altoona Public Library and/or its affiliate groups and vendors throughout the event.

Participant Name (please print)

Date Signed

Signature of Participant