



**ADOPT-A-STREET  
PROGRAM**

**LIABILITY WAIVER**

**Adopt-A-Street Group:** \_\_\_\_\_

**Participant Contact Information:**

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code : \_\_\_\_\_

Phone(d): \_\_\_\_\_ (e): \_\_\_\_\_ e-mail: \_\_\_\_\_

**Release of Liability and Waiver Agreement:**

In consideration of myself or my child's participation in the City of Otsego's Adopt-A-Street program I, the undersigned, agree that:

- A. All activities undertaken by me or my child are at my or my child's own risk and that the City of Otsego, its employees, agents, contractors and volunteers shall not be liable for any claim, demand, injury, damage, action, or causes of action whatsoever to myself or my child, my property or my child's property due to the negligence or failure to act of the City of Otsego, its employees, agents, contractors and volunteers arising out of or connected with my or my child's participation in this program. I expressly forever release and discharge the City of Otsego its employees, agents, contractors and volunteers from any such claim, demand, injury, damage, action, or causes of action whatsoever.
  
- B. I understand that my signature is required before my or my child's participation is allowed. I have read this agreement carefully and know and understand its contents. I agree to participate or allow my child to participate in the Adopt-A-Street program sponsored by the City of Otsego. I understand that participation in the program is completely voluntary and that the program is being offered as an optional activity for the benefit of the participants and that there is no requirement to participate in the program.

**Participant:** \_\_\_\_\_

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

*If participant is under eighteen (18) years of age:*

**Parent/Guardian:** \_\_\_\_\_

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