



**2023 WELLNESS AT THE SQUARE SERIES**

**You must read and sign waiver to participate.**

**Release and Indemnity Agreement**

The undersigned, for himself/herself/theirself and for the minors (persons under the age of 18 years) whose names appear below, agree to the following for participation in the Broadway Square Wellness at The Square series event(s):

In consideration of the participation of myself and the minors whose names appear below (my children or my wards), I hereby, on my behalf and their behalf, release the Fargo Park District, its agents, and employees from all claims for injuries or property damage that I or they may sustain arising out of the event(s). I and any such minors recognize and acknowledge that there are risks of physical injury to participants in the event(s) both known and unknown and I agree for myself and on their behalf to assume the risks of such injuries, damages, or loss which I or they may sustain as a result of participation in the Event(s). I release the Fargo Park District and its agents and employees from any such claims and I agree to indemnify and hold the Fargo Park District, its agents, and employees harmless from any claims made by myself or any of the minors listed arising out of or in any way related to the event.

By providing an email, I agree to receive relevant email communication and announcements from the Fargo Park District and Broadway Square. The person(s) executing the Release and Indemnity Agreement understands that the event(s) may be videotaped or photographed and agrees to such images and further agrees that images will be the sole property of the Fargo Park District and may be used for advertising and promotional use without notice to or consent of a participant, parent, or guardian and that any revenue derived there from shall be solely that of the Fargo Park District.

**I HAVE READ AND FULLY UNDERSTAND THE ABOVE DETAILS AND WAIVER AND RELEASE OF ALL CLAIMS.**

\_\_\_\_\_  
(Event Participant signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Event Participant - please print legibly)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
*(Email) Check this circle and provide valid, legible email address to receive emails regarding upcoming Broadway Square and Fargo Park District events and programming.*

**MINORS:**

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Date)