**RELEASE, ASSUMPTION OF RISK AND AGREEMENT TO HOLD HARMLESS**

**City of Portland, Maine**

Name:

Date of Birth:

Emergency Contact Person:

Relationship:

Cell Number:

I hereby request that I be permitted to assist the **City of Portland, Department of Recreation, as a volunteer in the After the Bell Program at Reiche Community School.**

I am aware that the Activity may subject me to risk of injury. I fully understand and agree that the City of Portland, its agents, officers, and employees accept no responsibility and will not be liable for any injury, harm, or damage to me personally or my property occurring during, or arising out of, or in connection with, the Activity.

To the fullest extent permitted by law, I do hereby agree to assume all risk of injury, harm, or damage to me or my property (including but not limited to all risks of injury, harm or damage to me or my property caused by the negligence of the City of Portland, its agents, officers or employees) arising during or in connection with the Activity. I do hereby release and agree to indemnify and hold harmless the City of Portland, its agents, officers, and employees from any and all liability, actions, damages, and claims of any kind and nature whatsoever (including but not limited to liability, actions, damages, and claims caused by or arising from the negligence of the City of Portland, its agents, officers, or employees) for injury, harm or damage to me or my property that may arise or occur during or in connection with said Activity.

And further, I hereby give my permission for emergency medical treatment in case I am unable to consent and the contact above cannot be reached.

Signature: Date:

Printed Name: Witness Signature:

Parent/Legal Guardian Signature: