

FIT-Fest Waiver/Release Form

Date: June 7, 2025

Location of Event: Gerald C. Yob Community Park, Freemansburg, PA

For and in consideration of the Borough of Freemansburg, Northampton County, Pennsylvania (the"Borough ") permitting the participant to enroll and participate in the Borough'sParks and Recreation Department Fit-Fest (the "Event"), Participant, by signing below, hereby voluntarily indemnifies, releases from liability, and holds the Borough, and its facilities, for any accident, injury, illness, death, loss, damage to person or property, or other consequences suffered by Participant or any other person arising or resulting directly or indirectly from Participant's participation in the Event. If Participant is injured, Participant agrees to assume any financial obligation, either through Participant's personal health insurance, or through some other means, for any medical costs which Participant incurs. The Borough assumes no responsibility for any medical expenses, injury, or damage suffered by Participant in connection with the use of any facilities or services in connection with the Activity.

IT IS THE INTENTION OF PARTICIPANT BY SIGNING BELOW TO EXPRESSLY ASSUME ALL RISK OF PERSONAL INJURY, DEATH, OR PROPERTY DAMAGE UPON HIM/HERSELF, TO THE EXCLUSION OF THE BOROUGH AND TO EXEMPT AND RELIEVE THE BOROUGH FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH.

Participant further agrees that Participant, his/her spouse, assignees, heirs, guardians, and legal representatives will not make any claim against, sue or attach the Borough for any loss or damage resulting from Participant's participation in the Event's activities.

PARTICIPANT IS AWARE OF THE POTENTIAL DANGERS INCIDENTAL TO ENGAGING IN THE FITNESS ACTIVITIES OF THE EVENT. PARTICIPANT AGREES THAT THIS IS A RELEASE OF LIABILITY, A WAIVER OF THE PARTICIPANT'S LEGAL RIGHT TO COLLECT DAMAGES IN THE EVENT OF INJURY, DEATH OR PROPERTY DAMAGE AND A CONTRACT BETWEEN PARTICIPANT AND THE BOROUGH,AND PARTICIPANT SIGNS IT OF HIS/HER OWN FREE WILL.

Print Participant Name:

Signature of Participant:

Date:

Location of Event:

My signature above also acknowledges my agreement that I may be videotaped, audio recorded and/or photographed during the Borough's Event, and the Borough may use and modify the images and/or recordings for any and all uses, including but not limited to advertisements and marketing without any compensation and in perpetuity.