

ADULT HOLD HARMLESS/INDEMNITY AGREEMENT

LOCATION/CATHOLIC ENTITY: St. Francis Borgia Parish

ACTIVITY PARTICIPANT NAME(S): _____

DATES OF ACTIVITY OR USAGE: _____

TYPE OF ACTIVITY OR USAGE: Parish Hikes - Transportation to and from the Hike location will be the responsibility of the adult Activity Participant

I would like to participate in the above referenced activity arranged by St. Francis Borgia Parish. I understand that this is an informal, voluntary adult activity.

I understand that participation in this activity will require physical exertion that could result in an injury and I assume all responsibility for my own health and physical conditioning and certify that I am in suitable, good physical condition to participate. If I have a question about my ability to safely undertake this physical activity, it is my responsibility to discuss it with my healthcare provider.

I understand that St. Francis Borgia Parish does not provide any health, accident, or disability insurance for participants in this Activity. I certify that I have adequate health and disability insurance that will respond to any illness or injury that may occur during the Activity.

The above named ACTIVITY PARTICIPANT(S) agrees to defend, protect, indemnify and hold harmless St. Francis Borgia Parish and its employees, agents and volunteers against and from all claims arising from the negligence or fault of the above named ACTIVITY PARTICIPANT(S), any of their family members or agents, and the negligence or fault of other Activity Participant(s) which arise out of the above named ACTIVITY.

Additionally, the above named ACTIVITY PARTICIPANT(S) agrees to protect, defend, hold harmless and fully indemnify St. Francis Borgia Parish and its employees, agents and volunteers from any claim or cause of action whatsoever arising out of the above mentioned ACTIVITY which takes place during the above identified DATE(S) OF ACTIVITY that is brought against St. Francis Borgia Parish and its employees, agents and volunteers by the above named ACTIVITY PARTICIPATE(S) or their family members or agents whether such claim arises from the alleged negligence of St. Francis Borgia Parish, its employees, agents and volunteers, or ACTIVITY PARTICIPANT(S)' negligence.

SIGNED BY: _____

PRINTED NAME(S): _____

