

HOOD RIVER COUNTY LIBRARY DISTRICT

Makerspace Agreement: Release, Hold Harmless, and Agreement Not to Sue

I, _____, request to participate in the Hood River County Library District (“Library”) Makerspace Program and/or give permission for a minor(s) to participate. I acknowledge that Makerspace activities may be inherently dangerous, and as a participant, I assume the risk of physical injury, death, and property damage.

If I am a parent or guardian of a minor participating in the Makerspace Program, my signature below serves as my release of liability for the following minor(s):

Name (minor): _____ Name (minor): _____
Name (minor): _____ Name (minor): _____
Name (minor): _____ Name (minor): _____
Name (minor): _____ Name (minor): _____

In furtherance of this request, I hereby agree to the following Release, Hold Harmless, and Agreement Not to Sue:

RELEASE, HOLD, HARMLESS AND AGREEMENT NOT TO SUE

I fully understand that participation in Makerspace activities exposes me to the risk of personal injury, death, or property damage. I hereby acknowledge that I am participating in the Makerspace activities for my personal benefit and agree to assume any risks. I hereby release, discharge and agree not to sue Library, its officers, agents, and employees for any injury, death, or damage to or loss of personal property arising out of or in connection with my participation in the Makerspace Program from whatever cause, including the active or passive negligence of Library, including its officers, agents, volunteers, and employees. In consideration for participation in the Makerspace Program, I hereby agree, for myself, my heirs, administrators, executors, and assigns, that I shall indemnify and hold harmless Library and its officers, agents, volunteers, and employees from any and all claims, demands, actions, or suits arising out of or in connection with my participation in the Makerspace Program.

I HAVE CAREFULLY READ THIS RELEASE, HOLD HARMLESS, AND AGREEMENT NOT TO SUE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT IT IS A FULL RELEASE OF ALL LIABILITY AND SIGN IT ON MY OWN FREE WILL.

Signed: _____

Print Name: _____

Date: _____

Contact Number: _____