



LIABILITY RELEASE

In consideration of being permitted to use the VFW Post 4443 facilities, I agree to RELEASE, INDEMNIFY, DEFEND AND HOLD HARMLESS all VFW members, officers, directors, contractors, volunteers, employees and insurers from ALL LIABILITY FOR NEGLIGENCE and any and all claims I might bring as a result of physical injury, including death, or property damage under all circumstances.

I am fully aware of and accept all risks, hazards and dangers associated with using any of the facilities and I am fully responsible for any and all damage or injury of any kind that may result from my use of the VFW Post 4443 facilities.

I HAVE CAREFULLY READ THE FOREGOING LIABILITY RELEASE, I UNDERSTAND ITS CONTENTS, AND I AM AWARE THAT I AM RELEASING CERTAIN LEGAL RIGHTS THAT I (OR THE MINOR CHILD) OTHERWISE MAY HAVE. I agree that this is a Release of Liability and Agreement Not to Sue, which will legally prevent me, or any other person, from filing suit or making any other claims for damages in the event of personal injury, death or property damage. I freely and voluntarily enter into this agreement. I understand that permission to use the facilities, premises and equipment is being given to the undersigned participant (or guardian) in exchange for the execution of this Liability Release and Agreement Not to Sue. I have made no misrepresentations regarding my name, age or any other information. This Liability Release will be in force with respect of any liability, injury or damage occurring.

If I am not willing to accept this release, then I should not sign this document and I should decline the services and/or equipment described on this form as offered to me by the VFW Post 4443.

Print Name

Signature

Date