

**Kayak & Sailboat Use
Waiver and Release of Liability**

In consideration of being allowed to participate in the City of Greensboro's kayak and/or sailing programs, and related events and activities, the undersigned agrees to the following:

I acknowledge and fully understand that I will be engaging in activities that involve risk of damage to personal property or serious injury, including permanent disability and death, and severe social and economic losses which might result not only from my own actions, inactions or negligence, but the actions, inactions or negligence of others, the rules of play, the condition of the premises, or of any equipment used. Further, there may be other risks not known or not reasonably foreseeable at this time.

I assume all the forgoing risks and accept personal responsibility for all expenses, medical or otherwise, following any such damages, injury, permanent disability or death.

I release, waive, discharge and covenant not to sue the City of Greensboro, employees of the organization, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and leasees of the premises used to conduct the event, all of which are hereinafter referred to collectively as "City", from any and all liability to me, and my heirs for any and all claims, demands, losses or damages on account of injury, including death, or damage to property caused or alleged to be caused in whole or in part by the negligence of the City or otherwise.

Persons 13-15 years of age may be allowed to launch or rent a solo kayak or a sailboat if they are accompanied on the lake by a parent or legal guardian over the age of 18. Persons 9-12 years of age may be allowed to launch or rent a solo kayak if they are accompanied on the lake by a parent or legal guardian over the age of 18, AND have successfully completed a Greensboro City Lakes Youth Kayak Eligibility Clinic (evidence of completion must be provided by the parent/guardian upon request by City staff). By signing this form I am attesting to my child meeting the criteria noted in this paragraph.

I HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND AM ACCEPTING RESPONSIBILITY FOR MY CHILD. I FURTHER STAT THAT I AM OF SOUND MIND AND THAT I AM VOLUNTARILY SIGNING THIS WAIVER.

Name (please print):

Signature:

Child's Name

Address

City, State, Zip:

Date of Birth of Child: