



Village of Brookfield

PARTICIPANT WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT

In consideration of the undersigned being given the opportunity to observe and/or take part in **Project N.I.C.E.** in any manner whatsoever, presented, sponsored, operated or provided by the Village of Brookfield, the undersigned hereby recognizes, acknowledges and assumes any and all risk of injury (including death) pertaining to observing or taking part in **Project N.I.C.E.**

The undersigned also acknowledges that he/she has received and reviewed pertinent printed materials relating to **Project N.I.C.E.** and agrees to participate voluntarily and at his/her own risk. The undersigned affirmatively states that he/she does not suffer from any type of ailment, illness or disorder that affects or may affect the undersigned's ability to participate in **Project N.I.C.E.**. The undersigned hereby acknowledges and assumes any and all risk of injury (including death) with relation to any type of ailment, illness, disorder or abnormality, whether known or unknown.

The undersigned hereby releases and agrees to defend, indemnify and hold the Village of Brookfield, its officials, agents and employees harmless from any and all liabilities, claims, injuries or damages of whatever nature, arising from, as a result on account of, directly or indirectly, observing or participating in **Project N.I.C.E.**

Any and all questions or concerns shall be brought to the attention of a member of the Beautification Committee prior to participating in **Project N.I.C.E.**. The Village of Brookfield reserves the right to deny participation to any person for any reason whatsoever.

This Waiver of Liability and Hold Harmless Agreement shall be governed by the laws of the State of Illinois and jurisdiction shall be proper only in the County of Cook, State of Illinois. The invalidity or unenforceability of any of the provisions hereof shall not affect the validity or enforceability of the remainder of this Agreement.

The undersigned must be present and complete this waiver in the presence of the Beautification Committee prior to participation in **Project N.I.C.E.**

By signing below, the participant has read and understands the waiver as described above.

Printed Name of Participant

Date of Birth

Signature of Participant

Date