

## **BLISSFIELD COMMUNITY SCHOOLS**

## 630 South Lane St. • Blissfield, Michigan 49228 (517) 486-2205 • Fax (517) 486-5701

Scott Riley, Superintendent

## Facilities 'Hold Harmless and Use' Agreement

Date of this Agreement: \_\_\_\_\_

(Group)\_\_\_\_\_

(Responsible Group Representative)\_\_\_\_\_

I understand that I will be permitted access to Blissfield School District Facilities on:

(Date of Event)

From (Starting Time of Event) \_\_\_\_\_\_to (Ending Time of Event) \_\_\_\_\_

and will agree to follow any and all rules governing use of the school facilities and any specific guidelines or restrictions at the sole discretion of Blissfield Community Schools.

In addition, I recognize that every activity has a certain degree of risk, and I knowingly and voluntarily assume the risk of any injuries, regardless of severity, including death, and all risk of damage to or loss of property which I may incur while I am participating in any activity.

Furthermore, I agree to indemnify and hold harmless Blissfield Community Schools, its boards, employees, and representatives from any and all claims, actions, suits, judgments and expenses including claims, costs, attorney fees and damages in connection with activities resulting in loss of life, bodily or personal injury, product liability claims and/or damage to property arising from or out of use by the User or its agents, members, partners, associates or employees.

I also understand I will responsible and will agree to pay for any damages to Blissfield Community Schools buildings, property and equipment that arises as a result of our use.

I understand and agree to all of the above conditions.

Print Participant name\_\_\_\_\_.

Participant signature	D	Pate:
1 0	der 18 years of age, Parent or Legal Guardian s	ignature)