



City of Center Line Parks & Recreation Department Liability Waiver

In consideration of being allowed to drive a vehicle in Memorial Park in the City of Center Line, I, _____ (please print full name clearly), the undersigned, acknowledge and agree that:

1. I understand that the vehicle may only be brought into Memorial Park in the City of Center Line for the purpose of loading and unloading.

2. I fully understand that by operation of a motor vehicle in Memorial Park I may cause property damage and/or physical injury to myself or others, including but not limited to serious bodily injury, permanent disability, or death. I am fully aware of the risks and hazards involved with my action and freely and voluntarily assume all risks, both known and unknown, even if arising from the negligence or alleged negligence of the Releasees named below.

3. I acknowledge and understand that the City of Center Line is immune from liability to the extent provided by Michigan law.

4. I, for myself and on behalf of my heirs, estate, assigns, personal representatives and next of kin, hereby knowingly and voluntarily, unconditionally and absolutely, waive, release, and discharge any and all past, present, and future claims, liabilities, costs, expenses, demands, and causes of action against the City of Center Line, its departments, employees, officers, representatives, and agents (“Releasees”) that are in any way related to my operation of a motor vehicle in Memorial Park in the City of Center Line. I intend this waiver, to the maximum extent permitted by law, to be effective even if my injuries are caused by a negligent act or omission of Releasees.

5. I agree to indemnify, defend, and hold harmless Releasees from all liability, claims, demands, causes of action, costs, expenses, and attorney fees (including attorney fees to establish the Releasees’ right to indemnification or incurred on appeal) resulting from or related to my actions.

I HAVE READ THIS LIABILITY WAIVER, FULLY UNDERSTAND THE TERMS, AND HAVE SIGNED IT FREELY AND VOLUNTARILY AND WITHOUT ANY INDUCEMENT.

X _____
Individual’s Signature

DOB

Date Signed