LIABILITY WAIVER AND RELEASE OF THE CITY OF MORA/KANABEC COUNTY/KANABEC COUNTY AG SOCIETY FOR PARADE PARTICIPANTS

I, the undersigned, in consideration of my participation in the Parade, do hereby release and discharge the City of Mora, Kanabec County, and the Kanabec County Agricultural Society, and their respective elected officials, officers, directors, employees, volunteers, partners, and contractors, jointly and severally, from any and all liability for personal injury, accident, illness, death, property damage, or other occurrence which I may suffer in any manner whatsoever arising out of, or resulting from, participation in said Parade.

I expressly assume ALL risks of my participation in the Parade, including, without limitation, injury as a result of the acts or omissions of any of the above-named parties, or some defect in or on the property of any of them, whether caused by negligence or otherwise, except for illness and injury resulting directly from the gross negligence or intentional misconduct of the City of Mora, Kanabec County, or the Kanabec County Agricultural Society, or their employees.

I agree to indemnify, save, hold harmless, and defend the City of Mora, Kanabec County, and the Kanabec County Agricultural Society, and their respective elected officials, officers, directors, employees, volunteers, partners, and contractors, from and against any and all loss, damages, expenses, costs, and attorney's fees arising out of, or resulting from, my participation in the Parade, including but not limited to any damages arising out of negligent or intentional conduct of other participants or third parties. I UNDERSTAND THAT THE CITY OF MORA, KANABEC COUNTY, AND THE KANABEC COUNTY AGRICULTURAL SOCIETY ARE NOT RESPONSIBLE FOR THE SUPERVISION OF THE PARADE.

I certify that any vehicle(s) which will be driven by me (if any) in the Parade has insurance which conforms to the laws of the State of Minnesota, and that I have a current, valid license.

I CERTIFY THAT I HAVE READ AND UNDERSTAND THIS WAIVER AND RELEASE, AND THAT, IF SIGNING ON BEHALF OF AN ORGANIZATION, I AM AN AUTHORIZED AGENT OF SAID ORGANIZATION WITH THE POWER TO BIND AND CONTRACT ON BEHALF OF SAID ORGANIZATION.

Signature: _____

Date: _____

(Participant or parent/guardian if under 18)

Printed Name: _____