

Release of Claims and Photo/Video Release

Name : _____ Date of Birth: _____
(Last Name) (First Name)

Please check each site visit you are registered for.

- June 8, 2021 Towpath Stage 4 June 9, 2021 Hemlock Trail June 10, 2021 Summit Lake Civic Commons
 June 8, 2021 Red Line Greenway June 9, 2021 Euclid Lakefront Trail June 10, 2021 Wendy Park Bridge

Release of Claims and Agreement to COVID Protocol

I recognize and acknowledge that there are risks associated with the aforementioned activity/program (the "Activity"), and I should not engage in the Activity unless medically able to do so. I assume all risks associate with the Activity, including but not limited to: falls; trips; contact with equipment or materials; effects of weather; contact with other participants, the natural environment, hazardous materials, and animals, which may act in unpredictable ways; infection or disease. I understand that neither the Board of Park Commissioners of the Cleveland Metropolitan Park District, Tremont West Development Corp, Canalway Partners, Bike Cleveland, City of Euclid, West Creek Conservancy, Greater Cleveland Regional Transit Authority, Summit Metro Parks, City of Akron, Cuyahoga County, Cuyahoga County Planning Commission, nor any of their commissioners, officers, employees, agents, volunteers or sponsors (the "Releasees") assume any responsibility or liability with respect to my participation in the Activity. As part of the consideration tendered for me being permitted to participate in the Activity, I agree to and do hereby waive any and all claims against, and agree to fully release, hold harmless, and indemnify, the Releasees from any and all claims related to any illness, injury, including loss of life, property damage, or loss of any other description which I may sustain arising out of, or in any way associated with, my participation in these activities, even though liability may arise out of the negligence or carelessness of the Releasees.

By signing below, I acknowledge my agreement to wear a facial covering during the Activity and comply with any other COVID-19 protocols put in place by Releasees. I also agree to conduct a screening before coming to the Activity, and will stay home if I am experiencing any symptoms of COVID-19 (shortness of breath, cough, chills, shaking, muscle pain, headache, sore throat, new loss of taste or smell, or gastrointestinal issues), have been in close contact (as defined by the CDC) with someone who has tested positive for COVID-19 in the last 14 days or am under an isolation period because I tested positive for COVID-19. My presence at the Activity serves as my representation that I am free from COVID-19 symptoms, and am not under a quarantine or isolation period.

Participant Signature

Date

Photo/Video Release

I hereby authorize Cleveland Metropolitan Park District, Tremont West Development Corp, Canalway Partners, Bike Cleveland, City of Euclid, West Creek Conservancy, Greater Cleveland Regional Transit Authority, Summit Metro Parks, City of Akron, Cuyahoga County, and Cuyahoga County Planning Commission to use, reproduce, and/or publish photographs and/or video that may pertain to me including my image, likeness and/or voice without compensation. I understand that this material may be used in various publications, public affairs releases, recruitment materials, broadcast public service advertising (PSAs), multimedia exhibits or for other related endeavors, including for commercial purposes. This material may also appear on Cleveland Metropolitan Park District, Tremont West Development Corp, Canalway Partners, Bike Cleveland, City of Euclid, West Creek Conservancy, Greater Cleveland Regional Transit Authority, Summit Metro Parks, City of Akron, Cuyahoga County, or Cuyahoga County Planning Commission or Internet Web Page and/or digital social media services.

By signing this form, I acknowledge that I have completely read and fully understand the above release and agree to be bound thereby. I hereby release all claims against any person or organization utilizing this material.

___ I agree

___ I do not agree

Participant Signature

Date