## NEWPORT MUNICIPAL UTILITY DISTRICT

## **NEWPORT JUNIOR PARK RANGERS**

## PARTICIPANT REGISTRATION FORM

Fill out this form (print clearly or type, and sign on reverse side). Please mail the completed form to Newport Municipal Utility District, 2727 Allen Parkway, Suite 1100, Houston, Texas 77019.

Name:				_(the "Participant")
Parent/Guardian:				_(the "Guardian")
(If Participant is under the age	of 18)			
Address:				
City:	State:		_Zip Code:	
Email:				
Home Phone:		Cell Phone:		
Emergency Contact Name:				
Emergency Contact Number:				

## Waiver of Liability (Read and sign below)

1. <u>Release & Waiver</u>. Participant and/or Guardian do hereby release and forever discharge and hold harmless Newport Municipal Utility District, its officers and directors ("Newport"), as well as its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from Participant's participation in the Newport Junior Park Rangers program (the "Program"). Participant and Guardian understand that this release discharges Newport from any liability or claim that the Participant and/or Guardian may have against Newport with respect to any bodily injury, personal injury, illness, death, or property damage that may result from Participant's participation in the Program with Newport, whether caused by the negligence of Newport or its officers, directors, employees, agents or otherwise. Participant and/or Guardian also understand that Newport does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance in the event of injury or illness.

**2.** <u>Consent to Medical Treatment</u>. Should an emergency situation arise that necessitates medical or surgical attention, I hereby give my consent and permission to Newport, its directors and representatives to act on my behalf in authorizing medical, dental, surgical care or hospitalization for the above named Participant, and I further authorize any attending physician(s) to make such decisions and to perform such medical treatment(s) and/or surgical procedure(s) and/or hospitalization upon and for the above named Participant, which may, in the professional opinion of the attending physician, be necessary and proper under the circumstances of any emergency situation. Participant and/or Guardian do hereby release and forever discharge Newport from any claim whatsoever which arises or may hereafter arise on account of any first aid, medical treatment, or service rendered in connection with the Participant's participation in the Program with Newport or with the decision by any representative or agent of Newport to exercise the power to consent to medical or dental treatment.

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**3.** <u>Assumption of Risk</u>. The Participant and/or Guardian understand that the Program may include work that may be hazardous to the Participant, including, but not limited to, exposure to animals both wild and domestic that may be on the land; erosion and general condition of Newport's property, both on and off roadways or paths; and the use of vehicles. Participant and/or Guardian hereby expressly and specifically assume the risk of injury or harm in the Program and release Newport from all liability for injury, illness, death, or property damage resulting from the Program.

**4.** <u>**Insurance.**</u> The Participant and/or Guardian understand that, except as otherwise agreed to by Newport in writing, Newport does not carry or maintain health, medical, or disability insurance coverage for any Participant. Each Participant is expected and encouraged to obtain his or her own medical or health insurance coverage.

**5.** <u>Photographic Release</u>. Participant and/or Guardian do hereby grant and convey unto Newport all right, title, and interest in any and all photographic images and video or audio recordings made by or on behalf of Newport during the Participant's participation in the Program with Newport, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings. Participant and/or Guardian further release Newport from any liability for the use of such photographic, video, or audio recordings.

**6.** <u>Other</u>. Participant and/or Guardian expressly agree that this release is intended to be as broad and inclusive as permitted by the laws of the State of Texas and that this release shall be governed by and interpreted in accordance with the laws of the State of Texas. Participant and/or Guardian agree that in the event that any clause or provision of this release is found to be legally insufficient, all other clauses and provisions shall remain in effect and shall continue to be enforceable.

By my signature I certify that I have read this release of liability. I further certify that I am fully informed as to its contents.

Date:	Date:		
Date:			

(If Participant is under the age of 18)