

AGREEMENT TO HOLD HARMLESS, DEFEND AND INDEMNIFY

WHEREAS, _____, a member of the Boy Scouts of America, hereinafter sometimes referred to as "Participant", wishes to use the St. Tammany Fire District No. 1 Training Academy and surrounding areas (hereinafter sometimes collectively referred to as Property) belonging to, or under the custody or control of the St. Tammany Parish Fire Protection District No. 1; and

WHEREAS, the St. Tammany Parish Fire Protection District No. 1 is willing to allow such activities at the sole risk of the participant and the undersigned individual; and

WHEREAS, the undersigned individual hereby realizes and acknowledges that activities in which the participant will be participating may entail risks and/or damages for which the undersigned individual assumes full responsibility; and

NOW THEREFORE, IN CONSIDERATION OF PERMITTING THE FOREGOING ACTIVITY AT THE SPECIAL INSTANCE AND REQUEST OF THE UNDERSIGNED INDIVIDUAL, SAID INDIVIDUAL, DOES HEREBY, FOR AND ON BEHALF OF HIMSELF AND/OR HERSELF, HIS/HER HEIRS, AND ASSIGNS, RELEASE, ACQUIT AND FOREVER DISCHARGE ST. TAMMANY FIRE DISTRICT NO. 1, ITS BOARD OF COMMISSIONERS, OFFICERS, AGENTS, EMPLOYEES, SERVANTS, AND ALL AFFILIATED PERSONS AND ENTITIES OF AND FROM ANY AND ALL LIABILITY FROM WHATEVER HARM, LOSS, INJURY, ILLNESS AND/OR DAMAGE SUSTAINED AT ANY TIME THAT MAY RESULT FROM THE ACTIVITIES RELATING TO OR CONNECTED WITH THE USE BY THE BOY SCOUTS OF AMERICA OF THE ST. TAMMANY FIRE PROTECTION DISTRICT NO. 1 TRAINING ACADEMY AND SURROUNDING AREAS, WHETHER SUCH INJURY OR ILLNESS IS CAUSED IN WHOLE OR PART BY THE FAULT, NEGLIGENCE, ACTS, ERRORS, OR OMISSIONS OF ANY FIRE DISTRICT PERSONNEL OR BY ANY VICE, DEFECT, WHETHER LATENT OR APPARENT, ON ANY PROPERTY (MOVABLE OR IMMOVABLE) REGARDLESS OF WHETHER OWNED, OPERATED, OR CONTROLLED BY THE FIRE DISTRICT.

I acknowledge that I have read this Agreement to Hold Harmless, Defend and Indemnify, that I fully understand the language contained therein, and that I have had the opportunity to consult with an attorney of my choosing before signing this Agreement.

Signed at Slidell, Louisiana this _____ day of _____, 2017, in the presence of the undersigned, competent witnesses.

CUB SCOUT NAME: _____ (PRINT)

PARENT NAME: _____ (PRINT)

PARENT SIGNATURE: _____ (SIGN)

WITNESS: _____ (SIGN)

WITNESS: _____ (SIGN)