## RELEASE AND HOLD HARMLESS AGREEMENT

THIS IS AN IMPORTANT LEGAL DOCUMENT. PLEASE READ CAREFULLY. THIS IS A LEGALLY BINDING DOCUMENT AND YOU ARE GIVING UP IMPORTANT LEGAL RIGHTS

	solicited under an		C 3012 The	information is for a	se to determine eligibility	· for
					Butner Training Center.	IOF
Disclosure of re	equested information	on is voluntary by	ut failure to d	sclose all or any na	rt of it may result in denia	1 of
permission to pa	articipate in such a	ctivities schedule	ed for	scrose an or any pa	it of it may result in dema	1 01
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,	<b>,</b>	<i>y</i> ,			**************************************	
2. PERSONAL	DATA:					
NAME:					AGE:	
	First	Middle	Last			
ADDRESS						
CITY				STATE	ZIP	
3. DECLARAT						
I desire to partic	cipate, at my own i	risk, in the activity	y described al	ove. I have been in	formed and fully realize t	hat
there are inhere	nt risks and danger	rs associated with	this activity	and that injury could	l result from my	
participation. H	owever, I knowing	gly and willingly	wish to partic	pate in this activity	. I represent that I will tak	e all
safety precautio	ns necessary there	to assuming sole	and full ners	onal responsibility f	or ensuring that all	- 411
reasonably fores	seeable safety requ	irements are met	to my person	al entirefaction prior	to my active participation	:
anah antivity L	state that I am in a	mements are met	to my person	ai satisfaction prior	to my active participation	ın
such activity. 18	state mat I am in g	ood nealth, physic	carry fit to en	gage in this activity.	and have no known med	cal
condition which	could jeopardize	my safety during	such participa	ation or be aggravat	ed by such participation.	As a
condition preced	dent to my being p	ermitted to engag	ge or participa	te in such activity, l	personally hereby foreve	r
release, acquit,	discharge, indemn	ify and hold harm	less the Unite	ed States, the State of	of North Carolina and thei	r
					l injury, illness, death, an	
					ame or nature in any man	
ansing out of of	in connection wit	n my parucipauo	n in the indica	ited activity. I unde	rstand and agree that I ma	y be
held liable for a	my damage or loss	to the United Sta	ites or the Stat	e of North Carolina	Government that is cause	d
by my negligene	ce, willful miscond	duct, or fraud whi	ile participatin	g in this activity.		
Date and Signature of	F Darticinant					_
Date and Orginature of	Tarticipant					
Printed Name of Parti	icipant					
and the	u oa					
If Participant is u	inder 18 years of age	<u>:</u>				
Signature of Parent or	r Legal Guardian	e management of the second		<del>-</del>		
James of Landell VI						
Drinted Name of D	est on Local Constitution			_		
Printed Name of Pare	ant of Legai Guardian					