



Township of Middletown
Clean Communities Mini-Grant Program

HOLD HARMLESS AND RELEASE AGREEMENT

THIS HOLD HARMLESS AND RELEASE AGREEMENT (hereinafter the "Agreement") by and between the Township of Middletown, Monmouth County, New Jersey, having an address at 1 Kings Highway, Middletown, New Jersey 07748 (the "Township") and

_____, having an address as listed herein below.
(Name)

We, the undersigned, understand that participation in the Township's Clean Communities Program involves activities that pose a potential risk of personal injury. Some examples of these activities include handling sharp or heavy trash; working outdoors in weather that can turn unexpectedly hot, cold, windy, or stormy; walking on surfaces that can conceal sharp or hazardous objects; working along roadways that are heavily travelled by automobiles, trucks and other vehicles.

In that regard, we assume all risks associated with our participation in the program and hereby for ourselves, heirs, executors, administrators, hereby agree to waive, release and forever hold harmless the Township of Middletown and its officials, employees and agents from and against any and all claims, demands, liabilities, risk of loss, losses, injuries, costs, expenses, fines, penalties and damages (*including without limitation, reasonable attorneys' fees*) of any nature, including wrongful death, arising out of or associated with any act or thing done whatsoever done or any condition created as a result of the undersigned's participation in the Township's Clean Communities Program.

We hereby certify that we have reviewed and understand the Clean Communities packet materials prior to the undersigned's participation in the program. We understand that while these materials contain instructions intended to protect me from injury, even my full compliance with those instructions will not guarantee that no injury will occur.

THIS RELEASE MUST ALSO BE SIGNED BY A PARENT/GUARDIAN FOR SIGNATORIES 18 YEARS OF AGE OR YOUNGER

Print Name

Date

Street Address

Signature

City/State/Zip

Parent/Guardian – Name

Group/Affiliation Name

Parent/Guardian – Signature

Group/Affiliation Name

Parent/Guardian Address (*if different from participants*)