



DEPARTMENT OF THE ARMY
UNITED STATES ARMY INSTALLATION MANAGEMENT COMMAND
HEADQUARTERS, US ARMY GARRISON, PRESIDIO OF MONTEREY
1759 LEWIS ROAD, SUITE 210
MONTEREY, CA 93944-3223

AMIM-PMW

Hold Harmless Agreement

Please read this document carefully before signing. If you have any questions, please contact us at Price Fitness Center, 831-242-5557, or consult an attorney.

Participant Information

Full Name	
Email Address	
Phone Number	
Are you registering any minor children? If Yes, list full names and ages of all participating minor children	

Acknowledgment of Risk

I acknowledge that participation in Presidio of Monterey MWR Activities (including but not limited to use of the fitness center, fitness classes, intramural sports, and fun runs) involves inherent risks. These risks may include, but are not limited to, muscle soreness, sprains, strains, cuts, bruises, ligament or cartilage damage, head, neck or spinal injuries, loss of use of limbs, eye damage, disfigurement, or even death. There may also be risks associated with travel to and from events, limited medical assistance, and the actions of other participants. This list is not exhaustive. I have read and understand the risks described above. Initials: _____

Waiver, Release, and Indemnification

I certify that I **and/or** my minor child(ren) are physically capable of participating in MWR Activities. I voluntarily assume full responsibility for any injury, death, loss of property, or expenses that may result from participation, whether caused by my own actions, those of my child(ren), other participants, or the staff of Presidio of Monterey MWR.

I agree to release and hold harmless the Presidio of Monterey MWR, Army MWR, the US Army Garrison Presidio of Monterey, the U.S. Army, and their staff, agents, and employees from any claims, damages, or losses arising from participation in MWR Activities, to the extent permitted by law.

I understand that this waiver does not prevent me or my child(ren) from bringing a claim that is protected by law, and that the enforceability of this waiver will be determined by a court if challenged. I have read and agree to the waiver, release, and indemnification terms above. Initials: _____

Consent to Publication of Photograph

I authorize the Presidio of Monterey MWR and its staff to use photographs or video recordings of me **and/or** my minor child(ren) for official purposes, including publicity and promotion.

Do you consent to the use of your (and your minor child(ren)'s) image as described above? Yes / No (circle one)

Medical Treatment Consent

In the event of an emergency, I authorize transportation to a medical facility and necessary emergency medical care for myself and/or my minor child(ren). I authorize the release of relevant medical information to medical personnel as needed. I understand that I am responsible for all medical costs and that I have adequate health insurance for myself and my family.

I have read and agree to the medical treatment consent above. Initials: _____

Signature and Agreement

By signing below, I confirm that I am of lawful age and legally competent to sign this waiver on my own behalf and, if applicable, on behalf of my minor child(ren). I have read and understood this agreement in its entirety.

Signature: _____

Printed Name: _____ Date: _____

For Office Use Only: Received by: _____ Date: _____