**Pond Maintenance and Algae Control Workshop Waiver**

By signing below, and as consideration for participating in The Good, the Bad and the Managed: Pond Scum & Maintenance Workshop, I agree to be bound by the following: I understand and acknowledge that my participation in the workshop is entirely voluntary. I also understand that I will be working in laboratory and outdoor settings, and may be handling water testing chemicals, river water, algae and aquatic organisms. I understand the nature of such activities and understand that unanticipated injuries, emergencies or situations may arise. I understand that these risks include minor injuries, such as scrapes, bruises, and strains, as well as exposure to and transmission of COVID-19 (aka coronavirus).

I understand that this Waiver, Release, and Indemnification form is intended to address all of the risks of any kind associated with my involvement in the Workshop, including such risks created by actions, inactions, carelessness, or negligence on the part of the Hamilton County Conservation District, Boone County Conservation District, and the Kenton County Conservation District. I accept and assume all such risks, whether or not known or identified and I assume all responsibility for any liability, injury losses and damages that I or my child may suffer as a result of or in any way connected with my or his/her involvement in the Workshops. I hereby release and forever discharge the Hamilton County Conservation District, Boone County Conservation District and the Kenton County Conservation District from any and all liability for and waive any and all claims for injury, loss, damage, or expense, including attorneys’ fees, in any way connected with my involvement in the Workshop, whether or not caused in who or in part by the negligence or other misconduct of Hamilton County Conservation District, Boone County Conservation District or the Kenton County Conservation District. I agree to indemnify and hold harmless Hamilton County Conservation District, Boone County Conservation District, and the Kenton County Conservation District from any and all claims, liability, loss, and expense, including but not limited to damages, legal expenses, and costs of defense, in any manner arising from my participation in the Workshop. I understand that this means that I will be financially responsible to reimburse Hamilton County Conservation District, Boone County Conservation District, and the Kenton County Conservation District if anyone makes a claim against them as a result of my actions or inactions.

If I am involved in any accident during participation in the Workshop, I authorize Hamilton County Conservation District, Boone County Conservation District, and the Kenton County Conservation District to seek medical treatment on my or my child’s behalf, including transportation to a medical facility. I agree and acknowledge that I will be responsible for all costs relating to such treatment or transportation. This Waiver shall be binding upon and inure to the benefit of my relatives, heirs, next of kin, executors, administrators, beneficiaries, personal representatives, successors and assigns who might pursue any legal action or claim for such liability, injury, loss or damage. I have read this agreement to participate and I fully understand its contents and that I have given up substantial rights by signing it. I am signing this agreement to participate voluntarily, freely and without any inducement or assurance of any nature not state herein; intended for it to be a complete and unconditional waiver, release, and indemnification to the greatest extents allowable by law; and agree that if any portion of it is held invalid, the remainder shall continue in full force and effect.

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Participants Name (Please Print):

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of parent of guardian (if under 18):