GILA COUNTY ADOPT-A-ROAD WAIVER FORM

Application is made by the undersigned to participate in the Adopt-a-Road pick-up event the Gila County R/W

Permit Number __________________

PLEASE FILL OUT AND RETURN THIS FORM PRIOR TO YOUR PICK-UP ACTIVITY

Did you conduct a safety meeting?  □ Yes  □ No

Name: ______________________________

Location (in or near): ____________________  Road Name: ____________________

HOLD HARMLESS CLAUSE: The permitted, all its participants, or where the participant(s) is a minor his/her parent or guardian shall indemnify, defend, and save harmless Gila County from any and all claims, demands, suits, actions, proceedings, loss, cost, and damages of every kind and description, including attorneys’ fees and/or litigation expenses, which may be brought or made against or incurred by the County on account of loss of or damage to any property or for injuries or death of any person, caused by, arising out of or contributed to, in whole or in part, for reasons of any act, omission, professional error, fault, mistake, or negligence of permittee, its employees, agents, or representatives in connection with or incident to the performance of this Agreement, or arising out of workers’ compensation claims, Unemployment Compensation Claims, or Unemployment Disability Compensation Claims of employees and/or its subcontractors or claims under similar such laws and obligations. Permittees’ and all of its participants’ obligation under this Section shall not extend to any liability caused by the sole negligence of Gila County or its employees.

WAIVER: The permittee, all its participants, or where the permittee is a minor his/her parent or guardian hereby waives the right to any damages or injury of any kind accruing to the permittee or to any participant arising out of or as a result of use of this permit except said waiver does not extend to any such claim which is caused by the sole negligence Gila County or its offices and employees.

Signature ___________________________ Print Name ___________________________ Date ___________________________

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