UNCONDITIONAL AND FULL GENERAL RELEASE OF LIABILITY, WAIVER, DISHCARGE AND CEVENANT NOT TO SUE

| This a legally-binding UNCONDITIONAL AND FULL GENERAL RELEASE OF LIABILIT | V \\\\\\\ED |
|---|-------------|
| DISCHARGE, AND COVENANT NOT TO SUE made by me, | i, whiely, |
| made by file, | |

(Hereinafter referred to as Operator) to the City of Farmer City and its council (hereinafter referred to as the City)

I FULLY RECOGNIZE THAT THERE ARE DANGERS AND RISKS TO WHICH I MAY BE EXPOSED BY OPERATING A GOLF CART/UTV ON CITY STREETS. THE FOLLOWING IS A DESCRIPTION AND/OR EXAMPLES OF SIGNIFICANT DANGERS AND RISKS ASSOCIATED WITH THIS ACTIVITY, INJURY TO MYSELF OR OTHERS, DAMAGE TO MY PROPERTY OR THAT OF OTHERS, DEATH OF MYSELF OR OTHERS.

IN NO EVENT SHALL THE CITY BE LIABLE FOR DIRECT, INDIRECT, SPECIAL, INCIDENTAL OR CONSEQUENTIAL DAMAGES WHETHER ARISING OUT OF OPERATOR'S USE OF A GOLF CART/UTV ON CITY STREETS.

THE OPERATOR, AS OF THE DATE BELOW, SHALL HEREINAFTER SAVE, HOLD HARMLESS AND INDEMNIFY THE CITY AGAINST ANY AND ALL LIABILITY CLAIMS, CAUSES OF ACTION AND COSTS OF WHATSOEVER KIND AND NATURE INCLUDING, WITHOUT BEING LIMITED TO INJURY, DAMAGE, LOSS INCLUDING DEATH, RESUTLING FROM, ARISING OUT OF OR OCCURRING IN CONNECTION WITH THE USE OF THIS GOLF CAR/UTV ON CITY STREETS.

I understand that he City has ordinance governing the use of golf carts/UTV's on City streets and hereby agree to conform to all requirements of the City ordinance at all times. I have had the opportunity to read said ordinance and my signature below acknowledges that I will comply with this ordinance and all of the applicable traffic laws of the State of Illinois at all times when operating this golf cart/UTV on City streets.

I, THEREFORE, AGREE TO ASSUME AND TAKE ON MYSELF ALL OF THE RISKS AND RESPONSIBILITIES IN ANY WAY ASSOCIATED WITH THIS ACTIVITY. IN CONSIDERATION OF AND RETURN FOR THE OPPORTUNITY TO OPERATE A GOLF CART/UTV ON CITY STREETS. I RELEASE THE CITY (AND THE MAYOR AND CITY COUNCIL, EMPLOYEES AND AGENTS) FROM ANY AND ALL LIABILITY CLAIMS AND ACTIONS THAT MAY ARISE FROM INJURY OR HARM TO ME OR OTHERS, INCLUDING DEATH, OR FROM DAMAGE TO MY PROPERTY OR PROPERTY OF ANY OTHER IN CONNECTION WITH THIS ACTIVITY. I UNDERSTAND THAT THIS RELEASE COVERS LIABILTY, CLAIMS AND ACTIONS CAUSED ENTIRELY OR IN PART BY ANY ACTS OR FAILURES TO ACT ON MY PART, INCLUDING BUT NOT LIMITED TO NEGLIGENCE, MISTAKE OR FAILUTRE TO ENFORCE, SUPERVISE, OR MAINTAIN.

I assure the City that there are no health-related reasons or problems which preclude or restrict my participation in this activity. I further assure the City that I have adequate health and liability insurance necessary to provide for and pay any medical costs or property damage that may directly or indirectly result from my participation in this activity, and I will indemnify and hold the City harmless for any such medical costs of property damage.

| . 67 | |
|------|--|
| | I understand that this Release means I am giving up, among other things, rights to sue the City, its Council, employees and/or agents for injuries (including death), damages, or losses I may incur or cause. I also understand that this release binds my heirs, executors, administrators, and assigns as well as myself. |
| | I HAVE READ THIS ENTIRE RELEASE, I FULLY UNDERSTANDIT, AND I AGREE TO BE |

| LEGALLY BOUND BY IT. | UNDERSTANDIT, AND I AGREE TO BE |
|----------------------|---------------------------------|
| Operator's Signature | Date |
| Witness | |

.