



MHAGC & REBECCA’S DREAM LIABILITY RELEASE FOR THE TAKE A STAND GREEN HAT WALK 5-19-2019

In consideration of participating in the Take a Stand Green Hat Walk (the “Walk”), I represent that I understand the nature of walking events and that I am qualified, in good health, and in proper physical condition to participate in such an activity. I acknowledge and agree that, if I believe event conditions are unsafe, I will immediately discontinue participation in the activity. Furthermore, I will comply with instructions as provided by the Walk supervisors, I will follow the stated route, and I will not embark until support staff is in place and the Walk route is officially opened.

I fully understand and agree that walking events can be dangerous activities that involve risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the “releasees” named below or other causes; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I incur as a result of my participation in the activity.

I hereby release, discharge, and covenant for myself, my heirs, executors and administrators, not to sue the Mental Health Association of Greater Chicago and Rebecca’s Dream and all of their partners and sponsors in this event, and its administrators, directors, agents, officers, volunteers, employees, other participants, additional sponsors, advertisers, and, if applicable, owners and lessors of premises on which the activity takes place (each considered one of the “RELEASEES” herein) from any and all liability, claims, demands, losses, causes of action or damages of whatever kind or nature, arising from or related in any way to my participation in the Walk caused or alleged to be caused in whole or in part by the negligence of the “releasees” or other causes, including negligent rescue operations. I further agree that if, despite this release, waiver of liability, and assumption of risk, I make a claim against any of the “releasees,” I will indemnify, save, and hold harmless each of the “releasees” from any loss, liability, damage or cost which may be incurred as the result of such claim, including reasonable attorney’s fees. This release, waiver of liability, assumption of risk and indemnity agreement shall be as broad and inclusive as permitted by the State of Illinois.

My Name: _____

My address: _____

Signature: _____ Date: _____

If individual above is under 18:

I, _____, certify that I am the legal guardian of the individual named above. I have read this release, approve of its terms and give my consent to the foregoing on his or her behalf.

Print Parent/ Legal Guardian Name if applicable: _____

Address of Parent/Legal Guardian: _____

Parent/Legal Guardian Signature if applicable: _____

Date: _____