



# CITY OF MORO

P.O. BOX 231 • 104 FIRST STREET • MORO, OREGON • 97039

PHONE: 541-565-3535 •

EMAIL: morocityhall@cityofmoro.net WEBSITE: www.cityofmoro.net

Name of Plot Owner:

Name of Contracted Individual/ Company

\_\_\_\_\_  
(First, Last)

\_\_\_\_\_

Plot Owner Preferred Contact Method

Contractor Contact Information:

\_\_\_\_\_  
(E-mail address/phone number)

\_\_\_\_\_  
(E-mail address/ phone number)

Plot Location

\_\_\_\_\_

Including dimensions and measurements, describe work to be performed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Project Start Date:

Project End Date:

\_\_\_\_\_

\_\_\_\_\_

## City of Moro- Moro Cemetery Hold Harmless Agreement

I know that cemetery restoration is a potentially hazardous activity. I should not undertake the duties unless I am medically able and properly trained. I also know that there may be open holes, tree stumps and other potential hazardous areas throughout the cemetery and I must watch for these hazards. I also know that leaning on, standing on or sitting on gravestones should not be done as they may fall and cause injury. I also assume any and all other risks associated with this effort including but not limited to falls, contact with wild life, contact with other participants, the effects of weather including high heat and/or humidity and the condition of the cemetery.

Knowing these facts, I hereby for myself, my heirs, executors, administrators or anyone else who might claim on my behalf, covenant not to sue, and waive, release and discharge the City of Moro and the Moro City Cemetery, including their employees, or anyone acting on their behalf, from any and all claims or causes of action (known or unknown, foreseen or unforeseen) for death, personal injury or property damage of any kind or nature including those arising out of their negligence in the course of my participation in cleanup /restoration efforts and all other events activities associated with this restoration.

I agree that the City of Moro and the Moro City Cemetery and any authorized officials have the right to remove me from the premises if they are of the opinion that it is in my best interest or that of the Cemetery.

By signing below, I acknowledge I understand and agree to this Hold Harmless Agreement in its entirety.

*First Name:* \_\_\_\_\_ *Last Name:* \_\_\_\_\_

*Date:* \_\_\_\_\_

*Emergency Contact:* \_\_\_\_\_