

Waiver of Liability for Battle for the Bridges Reenactment 2020

This agreement releases the Battle of the Bridge Historic Preserve, the Hart County Civil War Days Committee and the Hart Count Historical Society from all liability relating to injuries that may occur during the Civil War reenactment at Battle of the Bridge Historic Preserve occurring from September 11th, 12th and 13th 2020.

By signing this agreement, I agree to hold the Battle of the Bridge Historic Preserve, the Hart County Civil War Days Committee and the Hart Count Historical Society entirely free from any liability, including financial responsibility for injuries incurred, regardless of whether injuries are caused by negligence.

I also acknowledge the risks involved in Civil War reenacting. These include but are not limited to burns, abrasions and other wounds. I swear that I am participating voluntarily, and that all risks have been made clear to me. Additionally, I do not have any conditions that will increase my likelihood of experiencing injuries while engaging in this activity.

By signing below I forfeit all right to bring a suit against the Battle of the Bridge Historic Preserve, the Hart County Civil War Days Committee and the Hart Count Historical Society for any reason. In return, I will receive entry to the reenacting event. I will also make every effort to obey safety precautions as listed in writing and as explained to me verbally. I will ask for clarification when needed.

I, _____, fully understand and agree to the above terms.
(Print name)

_____, _____
Signature of Participant Date

Address

City State Zip Phone

Signature of Parent, or Guardian (if minor)