

**TOWN OF BATH  
RELEASE AND WAIVER OF LIABILITY AGREEMENT**

I, ("Participant"), acknowledge that I have voluntarily applied for a golf cart permit to operate a golf cart on the public roads and streets within the Town of Bath.

**I AM AWARE THAT OPERATING A GOLF CART ON PUBLIC ROADS AND STREETS IS A POTENTIALLY DANGEROUS ACTIVITY AND THAT I COULD BE SERIOUSLY INJURED OR EVEN KILLED. I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED, AND AGREE TO ASSUME ANY AND ALL RISKS OF BODILY INJURY, DEATH OR PROPERTY DAMAGE, WHETHER THOSE RISKS ARE KNOWN OR UNKNOWN.**

**I verify this statement by signing below, or my parent(s) or guardian(s) verify this statement by signing below.**

As consideration for being permitted to operate a golf cart on the roads and streets of the Town of Bath, I agree and consent that the Town of Bath ("Town"), its successors and assigns, employees, representatives and agents, are forever released from any and all liability, actions, claims, or demands that I, my assignees, heirs, distributees, guardians, next of kin, spouse and legal representatives now have, or may have in the future, for injury, death, or property damage, related to (i) my, or my assignees', operation of a golf cart on the streets and roads of the Town, (ii) the negligence or other acts I or my assignees commit, whether directly connected to these activities or not, and however caused, or (iii) the condition of the premises where these activities occur, whether or not I am then participating in the activities. I also agree that I, my assignees, heirs, distributees, guardians, next of kin, spouse and legal representatives will not make a claim against, sue, or attach the property of the Town in connection with any of the matters covered by the foregoing release.

**I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE TOWN, AND I SIGN IT OF MY OWN FREE WILL.**

**If Signed by Parent or Guardian: I verify that the dangers of the activities and the significance of this Release and Waiver were explained to the Participant and that the Participant understood them.**

This the \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

**PARTICIPANT**

**RELEASOR PARENT OR GUARDIAN**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

Address: \_\_\_\_\_  
\_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_