

# **Informed Consent, Waiver and Release of Liability Agreement**

## **Burleigh County Sandbagging Operations**

The undersigned, being at least 18 (eighteen) years of age, does hereby agree to this consent, waiver, and release of liability.

### **Acknowledgement and Assumption of Risk**

I recognize that the sandbagging operations will involve physical labor and may carry a risk of personal injury. I hereby agree to assume all risks which may be associated with or may result from my participation in this effort.

I also recognize that the physical activity may cause physical and emotional discomfort. I state that I am free from any known heart or other health problems that could prevent me from participating. I further state that I am sufficiently physically fit to participate in the activities.

### **Waiver and Release of Liability**

I agree to release the State of North Dakota, Burleigh County, their agencies, departments, officers, employees, agents, and all sponsors and/or officials and staff of any said entity or person, their representatives, agents, affiliates, directors, servants, volunteers, and employees from the cost of any medical care that I receive while participating in this activity or as a result of it.

I further agree to waive, release, and discharge Burleigh County from any and all liability, claims, demands, actions, and causes of actions whatsoever, except to the extent prohibited by N.D.C.C. § 9-08-02, for any loss, claim, damage, injury, illness, attorney's fees or harm of any kind or nature to me arising out of any and all activities associated with participating in this activity or as a result of it.

### **Consent**

In the event of injury while participating in any and all activities associated with the Program, I consent to receive any emergency medical aid, anesthesia, and/or medical treatment or operation if, in the opinion of the attending physician, such treatment is necessary.

I, the undersigned participant, affirm that I am at least 18 years of age and am freely signing this agreement. I have read this form and fully understand that by signing this form I am giving up legal rights and/or remedies which may otherwise be available to me regarding any losses I may sustain as a result of my participation. I agree that if any portion is held invalid, the remainder will continue in full legal force and effect.

### **READ BEFORE SIGNING**

NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

WITNESS: \_\_\_\_\_ DATE: \_\_\_\_\_

## **Authorization for Participants Under 18 Years of Age**

NAME OF MINOR\_\_\_\_\_

NAME OF MINOR\_\_\_\_\_

NAME OF MINOR\_\_\_\_\_

NAME OF MINOR\_\_\_\_\_

NAME OF MINOR\_\_\_\_\_

I have read the “Informed Consent, Waiver and Release of Liability Agreement” and do hereby authorize and give permission for the above-names minor(s) to participate in Burleigh County Sandbagging Operations.

PARENT/GUARDIAN NAME\_\_\_\_\_

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

WITNESS: \_\_\_\_\_DATE: \_\_\_\_\_

Return completed form to Burleigh County Emergency Management.