UPPER PROVIDENCE TOWNSHIP, MONTGOMERY COUNTY

VOLUNTARY LIABILITY WAIVER, RELEASE, AND ASSUMPTION OF RISK

Activity: _____

Location: Upper Providence Township, Montgomery County, Pennsylvania

INSTRUCTIONS: This is a legally binding document. Please read it carefully before signing. By signing this document, you are waiving certain legal rights, including the right to sue Upper Providence Township, its officials, employees, and designated consultants.

1. PARTICIPANT INFORMATION

Full Name (Printed): _____

Address: _____

Phone Number: _____ **Email:** _____

Emergency Contact Name & Phone: _____

2. ACKNOWLEDGMENT AND ASSUMPTION OF RISK

I, the undersigned, understand that participating in the _____ _____ involves physical activity on public roads, open streets, existing sidewalks, shared-use paths, unpaved terrain, and utility corridors, etc. within Upper Providence Township. I acknowledge that this physical activity is an inherently hazardous activity that carries risks, including but not limited to:

- Collisions with motor vehicles, cyclists, or pedestrians;
- Hazards associated with road and trail conditions, such as potholes, gravel, debris, uneven pavement, and blind intersections;
- Equipment malfunctions or failures; and
- Weather-related hazards, heat exhaustion, or physical overexertion.

I explicitly acknowledge that the purpose of this tour is to examine existing conditions, gaps, and potential connection challenges to help form the Township's planning roadmap. Certain routes we navigate may intentionally feature substandard infrastructure or difficult connections under study. **I voluntarily choose to participate and assume all risks of personal injury, death, or property damage.**

3. RELEASE AND HOLD HARMLESS COVENANT

In consideration for being permitted to participate in this tour, I, on behalf of myself, my heirs, executors, administrators, and assigns, hereby release, waive, discharge, and covenant not to sue Upper Providence Township (including its Board of Supervisors, officers, employees, agents, and volunteers) and Campbell Thomas & Co. (including their officers, employees, and sub-consultants) from any and all liability, claims, demands, or causes of action arising out of my participation in this event, including property damage, personal injury, or wrongful death.

4. PARTICIPANT COMPLIANCE AND SAFETY RULES

By signing below, I agree to adhere to the following safety regulations during the tour:

- **Helmet Requirement:** If participating in an activity that involves a bike, I will wear a properly fitted, ANSI/SNELL/CPSC-approved bicycle helmet at all times while riding.
- **Traffic Laws:** I will obey all Commonwealth of Pennsylvania traffic laws (Title 75) applicable to pedestrians and bicycles.
- **Instructions:** I will follow all route directions and safety briefings provided by the tour leaders and designated planning consultants.
- **Equipment Fitness:** I certify that any personal equipment, including bicycles and related equipment, are in safe, working mechanical condition.

5. PHOTO AND MEDIA RELEASE

I understand that photographs, video, and digital mapping feedback may be captured during this public planning event to document the Trail Master Plan process. I grant Upper Providence Township and its consultants permission to use my likeness, comments, or images in future public presentations, plan documents, and website updates without compensation.

6. ACKNOWLEDGMENT OF UNDERSTANDING

I have read this Voluntary Liability Waiver, Release, and Assumption of Risk. I fully understand its terms and realize that I am giving up substantial rights, including my right to sue Upper Providence Township or its consultants. I sign it freely and voluntarily.

Participant Signature: _____ **Date:** _____