

FORSYTHCOUNTY Board of Commissioners
Release and Waiver

Event _____

Date _____

Sponsor _____

Address _____

Contact _____

Phone _____

Email _____

In signing this release, I acknowledge that I understand the intent thereof, and I hereby agree and will absolve and hold harmless the Forsyth County Board of Commissioners and its agents, officers, and employees singly or collectively from and against any blame and liability for any injury, misadventure, harm, loss, inconvenience, or damage hereby suffered or sustained while participating in the _____ to be held on _____, 20_____.

Signature _____ **Date** _____