## JEFFERSON COUNTY WALKING TRACK RELEASE OF LIABILITY FORM

I,		, hereby acknowledge that I have
	n to use the walking tra	ack, located in the 2121 Building, offered through my
CARDIOVASCU BE A HAZARD THESE ACTIVE HEREBY AGRE UNDERSTAND THAT I PART	ULAR SYSTEM AND OUS ACTIVITY, AN ITIES WITH KNOW EE TO ACCEPT ANY THAT I AM RESPO- ICIPATE ACCORDI YSICIAN AS WELL	OROUS PHYSICAL EXERCISE STRAINS THE ALL OTHER PARTS OF MY BODY AND CAN NO I AM VOLUNTARILY PARTICIPATING IN VLEDGE OF THE DANGER INVOLVED AND AND ALL RISKS OF INJURY AND DEATH. I NSIBLE FOR MY HEALTH AND SAFETY AND NG TO ANY LIMITS DETERMINED BY MY AS MY KNOWLEDGE OF MY OWN HEALTH
As lawful consideration for being permitted by Jefferson County to use the walking track, I hereby agree that I, my heirs, distributes, guardians, legal representatives and assigns will not make a claim against, sue, attach the property of, or prosecute Jefferson County, and its officers, agents, and employees, for injury or damage resulting from the negligence or other acts, however caused, by any employee, agent, or contractor of Jefferson County as a result of my use of the walking track. In addition, I hereby release and discharge Jefferson County their officers, agents, representatives, and employees from all actions, claims or demands I, my heirs, distributes, guardians, legal representative, or assigns now have or may hereafter have for injury or damage resulting from my participation in any exercise or other activity performed at the walking track.		
I understand that any injury sustained while using the walking track is to be covered under my health insurance policy and is NOT covered under Workers' Compensation. I further acknowledge that at all times I am participating in any exercise or other activity at the walking track, I am doing so on my own time, at my own accord, and I am in <b>NO WAY</b> participating in an activity that is within the course and scope of the job I was hired to perform. Initial		
CONTENTS. I		AGREEMENT AND FULLY UNDERSTAND ITS THIS IS A RELEASE OF LIABILITY AND A FERSON COUNTY.
I SIGN THIS AGREEMENT AT MY OWN FREE WILL.		
Dated:	Participant	Department
Dated:	Witness	