



## Special Event Release of Liability Waiver

I, (please print name) \_\_\_\_\_,

representing (organization) \_\_\_\_\_ acknowledge

that I am not covered by any City of Greensboro insurance policy, that our organization agrees to

hold the City of Greensboro, its officers, its employees, and its agents harmless from any and all

claims, losses, damages, or claims or liability arising out of or proximately caused by the

undersigned from any activity, including the cost of the defense of claim and attorneys fees.

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

\_\_\_\_\_  
(Applicant Signature)

**This form must be completed, signed and returned with the completed application.**