ARAPAHOE COUNTY SHERIFF'S OFFICE



Sheriff's Driving Track Release, Hold Harmless and Indemnification Agreement

I, ______, (name), the undersigned, on this _____ day of _____, 20___, in consideration of my being allowed access to and use of the Sheriff's

Driving Track at the Arapahoe Co	unty Fairgrounds p	roperty, agree as follows:
County Sheriff's Driving Track or to, any driving or training activitie County and the Arapahoe County elected and appointed officials, bo every kind or nature which include damage to my personal property of acts or omission of any other person Arapahoe County Sheriff's Office County Sheriff, and persons with v	the Arapahoe Cours that I participate sheriff's Office, the ards, employees, such that is not limited to personal affects; and (which includes, and its affiliates, in whom other employeds) release of liabil	lated to my use of or presence at the Arapahoe nty Fairgrounds property, including, but not limited in at such Track, and agree to release Arapahoe eir principals, affiliates, sponsors, volunteers, agents, accessors and assigns from any and all liability of I to: 1) any personal injury or death to myself; 2) any and/or 3) any other loss or damage resulting from the but is not limited to, myself, all employees of the accluding all officers employed by the Arapahoe yees of the Arapahoe County Sheriff's Office and its ity to cover all situations, which may occur in twing Track.
Sheriff's Office, and their principal officials, boards, employees, succeeduity which may be asserted again	als, affiliates, spons essors and assigns f nst any of them for	fy Arapahoe County and the Arapahoe County ors, volunteers, agents, elected and appointed from any liability in any cause of action in law or any act or omission arising out of my use of the but not limited to, any driving or training activities
understanding that my personal ins	surance may not co	azards and acts of any negligent person, over the activities in which I participate while using his Release, Hold Harmless and Indemnification
I additionally intend to bin may file any claim upon my behal	• •	s, legal representatives, assigns, and anyone else who
		al, and not a mere recital. I agree that should a court aining parts of this release shall remain in full force
I have read this release and acceptance of the terms of this rele		t this release means. I indicate my voluntary name below.
Participant's Signature	Date	Law Enforcement Agency
Participant's Printed Name	Date	Your Department Mailing Address
ACSO Witness Signature	Date	Your Department Phone Number