



RELEASE OF LIABILITY

1	_, in consideration of my VOLUNTARY
participation in the OVER THE HILL	
Loyalhanna Watershed Association,	Inc., Latrobe-GLSD Parks &
Recreation, the City of Latrobe, and	Greater Latrobe School District (at any
location) and any individual connecte	ed herewith from <u>any</u> and <u>all</u> property
damage or liability arising from person	 ·
death suffered as a result of my volu	
	yalhanna Watershed Association, Inc.
The participant willingly assumes all	risks inherent in the OVER THE HILL
CHALLENGE and will hold Loyalhan	na Watershed Association, Inc.,
	and its affiliates, directors, employees
and volunteers harmless from any pa	-
· · · · · · · · · · · · · · · · · · ·	free and harmless from liability of any
	ess/death from unknowing exposure to
the COVID-19 virus.	
I attest and verify that I am physicall	y fit and have sufficiently trained for this
	hotographs and/or video recordings of
me for promotional purposes only.	
Printed Name of Participant:	
rinted Name of Farticipant.	
Signature of Participant:	
Date Signed:	
Signature of Parent/Guardian	
if Participant is under 18:	