



City of Roanoke
Community/Senior Center
312 S. Walnut Street
Roanoke, Texas 76262
Telephone: 817-491-6060

Participant Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Date of Birth: _____

Phone Number _____ Cell Phone: _____

Email: _____

Emergency Contact 1 Name: _____ Phone: _____

Relationship to Participant: _____

Emergency Contact 2 Name: _____ Phone: _____

Relationship to Participant: _____

Indemnification:

PARTICIPANT assumes all liability and responsibility for and agrees to fully indemnify, hold harmless and defend the City of Roanoke, and its officers, agents, servants and employees from and against all claims, damages, losses and expenses, including but not limited to attorney's fees, for injury to or death of a person or damage to property, arising out of or in connection with, directly or indirectly, the performance, attempted performance or nonperformance of the services referenced herein or in any way resulting from or arising out of the management, supervision, and operation of the program and activities of the PARTICIPANT.

Please Print Name: _____

Signature of Participant: _____

Date: _____

Staff Signature: _____ Date: _____