



WHITE LAKE  
COMMUNITY  
LIBRARY

3900 White Lake Dr.  
Whitehall MI 49461  
231-894-9531

ACCIDENT WAIVER, RELEASE OF LIABILITY AND INDEMNITY/HOLD HARMLESS

AGREEMENT FOR THE USE OF LOANED EQUIPMENT

I acknowledge that the use of the equipment listed below can be an extreme test of a person’s physical limits and carries with it the potential for death, serious injury, and property loss. The risks include, but are not limited to, those caused by facilities, temperature, condition of equipment and the actions of other people. I hereby assume all the risks of using the equipment.

I certify that I am over the age of 18, physically fit and able to use the equipment, and have not been advised otherwise by a qualified medical person.

I acknowledge that this Accident Waiver and Release of Liability form will be used by White Lake Community Library and will govern my actions and responsibilities.

In consideration of permitting me to use the equipment, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns to: (A) Waive, Release, and Discharge from any and all liability for my death, disability, personal injury, property damage, or actions of any kind which may hereafter accrue to me, the following entities or persons: White Lake Community Library, their elected and appointed officials, employees and volunteers, and others working or acting on behalf of White Lake Community Library; and to the extent permitted by law; (B) **Indemnify and Hold Harmless White Lake Community Library from any and all liabilities or claims made by other individuals or entities as a result of, or relating to my use of the equipment.**

**I hereby certify that I have read this document and understand and agree to its content.**

Equipment to be checked out: \_\_\_\_\_

Name (please print legibly): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**STAFF USE ONLY**

Staff Name: \_\_\_\_\_ Date: \_\_\_\_\_