

# SPECIAL EVENT PERMIT HOLD HARMLESS AGREEMENT

I/We the undersigned, being of lawful age, by affixing my/our signatures hereto, do hereby agree to indemnify and to hold harmless the City of Sonora, its officers, employees, elected officials and agents, from and against any and all liability claims, actions, causes of action, demands, rights, damages, cost, loss of service, expenses, and compensation for all negligence whether active or passive arising out of or in any way connected or related to \_\_\_\_\_  
to be held on \_\_\_\_\_ (Date) (Name of Event)

\_\_\_\_\_  
Name of sponsoring Individual(s) or Organization/Group

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone No. (include Area Code)                      \_\_\_\_\_  
Email Address

I understand by affixing my signature to this release that I do assume all risks and waive defendant's negligence, including a release of heirs.

Furthermore, the undersigned hereby acknowledges receipt of the Special Event Permit Application and willingness to adhere to its provisions.

**AUTHORIZED REPRESENTATIVE**  
*(To be completed by individuals representing an Organization or Group)*

I, \_\_\_\_\_, warrant that I have authority to bind \_\_\_\_\_  
*(Name of individual) (Name of Organization/Group)*  
to this Hold Harmless Agreement and by my signature hereon do so bind this individual/organization. By executing this waiver as an authorized representative you are hereby binding all of your organization/group's individuals participating in this event to this waiver and hereby assume responsibility for these individuals.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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**For Minors:** *(required for participants under the age of 18 at the time of the event)*

This is to certify that I, as parent or legal guardian, have legal responsibility for this participant. I have read and understand the significance of this waiver and release and do consent and agree to his/her waiver, release and assumption of the risk as provided above.

\_\_\_\_\_  
*(Print Name of Parent/Legal Guardian)*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date