CITY OF WESTON
EVENT INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

Applicant _____agrees to indemnify, defend and hold harmless the City of Weston, its officers, agents, independent contractors, servants, volunteers and employees against any and all injuries, liability, claims, judgments, attorney's fees and any and all causes of actions and damages, for any and all personal injury and/or property damage arising out of the following activity, function or program:

_____ to be held at _____

on the following date(s) and time(s)_____

Further, the Applicant **WAIVES ANY CLAIM** against City arising out of the above described activity, function or program, including any claim for negligence and does **COVENANT NOT TO SUE** the City relating to such activity. This indemnification and hold harmless shall continue notwithstanding any negligence or comparative negligence on the part of the City or its agents relating to such action, damage or claim.

Applicant voluntarily assumes the risk of any loss, injury or damage to person or property,which in any way arises out of the above described activity, function or program.

The Applicant agrees that this indemnification and hold harmless shall be binding on the Applicant's successors and assigns. Any provisions in this indemnification and hold harmless that are prohibited or unenforceable under Florida or Federal law shall be ineffective to the extent of such prohibition without invalidating the remaining provisions hereof.

Applicant's Signature _____

Applicant Name _____ Date _____

STATE OF FLORIDA)
COUNTY OF BROWARD)

The foregoing instrument was acknowledged before me by means of ____ physical presence or ____ online notarization, this _____ day of _____, 20___, by _____ as _____
(Name of person acknowledging) *(Title)*
for _____.
(Company name)

Personally known to me _____ or has produced Identification _____, type of identification produced_____.

(NOTARY SEAL HERE)

_____
SIGNATURE OF NOTARY PUBLIC

PRINT, TYPE/STAMP NAME OF NOTARY