



Margate City

Beach Transportation Program Application

Please Mail Completed Application to Margate Recreation Department – 8103 Winchester Avenue, Drop off at Margate Municipal Building, or Martin Bloom Pavilion

Name: _____

Address: _____

Contact Number: _____

Email: _____

Reason for Transport: _____

Street you Sit on: _____

Emergency Contact: _____

Emergency Contact Number: _____

RELEASE AND WAIVER OF LIABILITY AGREEMENT

I, _____

("Participant"), acknowledge that I have voluntarily applied to participate in the City of Margate Beach Transportation Program.

I AM AWARE THAT PARTICIPATION MAY INVOLVE A HAZARDOUS ACTIVITY AND THAT I COULD BE SERIOUSLY INJURED OR EVEN KILLED. I AM VOLUNTARILY PARTICIPATING IN THE PROGRAM WITH KNOWLEDGE OF THE DANGER INVOLVED, AND AGREE TO ASSUME ANY AND ALL RISKS OF BODILY INJURY, DEATH OR PROPERTY DAMAGE, WHETHER THOSE RISKS ARE KNOWN OR UNKNOWN.

As consideration for being permitted by the City of Margate, State of New Jersey to participate in the Beach Transportation Program and ride in or on vehicles provided for the same, I forever release City of Margate, and their respective directors, officers, employees, volunteers, agents, contractors, and representatives (collectively "Releasees") from any and all actions, claims, or demands that I, my assignees, heirs, distributees, guardians, next of kin, spouse and legal representatives now have, or may have in the future, for injury, death, or property damage, related to (i) my participation in the program, (ii) the negligence or other acts associated with the program whether or not caused by any Releasee, or (iii) the condition of the premises where these activities occur.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND CITY OF MARGATE, AND SIGN IT OF MY OWN FREE WILL.

Print Here: _____ Date: _____

Signature: _____

Parent or Guardian's signature (if participant is under 18 or not independent):
