



**Informed Consent  
and  
Liability Waiver Release**

**Adult Participant**

I hereby certify that I am consenting to my participation in the Bowling Party conducted by **Bossard Memorial Library** at Skyline Lanes, Gallipolis, Ohio on July 25, 2019.

I understand and acknowledge that I am fully aware that bowling is an inherently risky activity, my participation is voluntary, and I am qualified, in good health, and in proper physical condition to participate therein.

I further acknowledge and understand that I will be engaging in activities that involve the risk of serious injury (including death), which may result from my participation, and/or the action, inaction, and/or negligence of other parties. I further understand and agree that this activity may involve risks not know to me, or that are not reasonably foreseeable.

Knowing the risks described above, I agree to assume full responsibility for any risks, injuries (including death), damages, or loss, known or unknown surrounding my participation in the bowling party and use of the lanes, shoes, and balls.

In consideration for my being permitted to participate in the bowling party, I, knowingly, voluntarily, and expressly waive any claim I may have against the **Bossard Memorial Library** for injury, damages, loss, or death that may be sustained as a result of participating in the bowling party.

Further, I, my heirs, executors, administrators, and personal representatives forever release, waive, discharge, and covenant not to sue the **Bossard Memorial Library** for any injury, damages, loss, or death caused by their negligence or other acts.

I have read the above waiver and release of liability and fully understand its contents. I voluntarily agree to the terms and conditions stated above. I agree that this waiver and release is intended to be as broad and inclusive as permitted by the laws of Ohio.

Participant's Printed Name: \_\_\_\_\_

Participant's Signature: \_\_\_\_\_

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