

Golf with a Cop
PERMISSION SLIP June 4, 2022

Participant's Name _____ Age _____

- I voluntarily allow my child to participate in the Golf with A Cop event at Ronnie's Golf Hospital – Driving Range
- My child will take all safety precautions recommended by the program's sponsors to try and avoid danger to themselves or others.
- Participating youths aged 16 and under are eligible to receive event

To the fullest extent allowed by law, **Participant**, agrees to save, defend, indemnify, and hold harmless **The City of Northfield, The Northfield Municipal Alliance and Ronnie's Golf Hospital**, its elected and appointed officials, its employees, agents, volunteers and others working on behalf of the Municipality, from and against any and all claims, losses, costs, attorney's fees, damages, or injury including death and/or property loss, expense claims or demands arising out of or caused or alleged to have been caused in any manner for all claims, losses, expenses and damages, including but not limited to court costs and reasonable attorney fees, which may be asserted against **The City of Northfield, The Northfield Municipal Alliance and Ronnie's Golf Hospital** arising out of the negligence or the negligent acts of **Participant** while participating in the Youth Fishing Challenge held by the Northfield Municipal Alliance.

Print Name of Guardian: _____ Phone: _____

Address: _____

Signature of Guardian

City of Northfield