

## Liability Release Form

**Activity:** \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, intending to be legally bound hereby, the undersigned agrees and does hereby release from liability and to indemnify and hold harmless **Comal County Genealogy Society (CCGS)** and any of its Officers and Board of Directors. This release is for any and all liability for personal injuries (including death) and property losses or damage occasioned by, or in connection with any activity or accommodations for this event. The undersigned further agrees to abide by all the rules and regulations promulgated by CCGS.

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

Guest/member Name(please print) \_\_\_\_\_

Signature of Guest/member participant \_\_\_\_\_

Signature of Parent/Guardian  
(if participant is under 18) \_\_\_\_\_