

# NEW PALTZ REGATTA RELEASE and INDEMNIFICATION AGREEMENT

In consideration for the sum of One and 00/100 (\$1.00) Dollar paid to me by the Village of New Paltz, a municipal corporation of the State of New York, maintaining its offices at 25 Plattekill Avenue, New Paltz, New York 12561 and the Town of New Paltz, a political subdivision of the County of Ulster, State of New York, maintaining its offices at 1 Veteran's Drive, New Paltz, New York 12561, the receipt of which is hereby waived, I, the undersigned, on behalf of myself and those persons whose names are listed below, who are my children or to whom I have been given explicit custodial authority in regard to their participation in the Wallkill River Regatta sponsored by the Village of New Paltz and the Town of New Paltz on June 12<sup>th</sup> 2022 and our respective distributees, heirs at law, personal representatives and assigns **HEREBY RELEASE AND DISCHARGE** the Village of New Paltz and the Town of New Paltz, and their respective agent, officers, and employees from all actions, causes of action, suits, claims and demands which against the Village of New Paltz or the Town of New Paltz, I, the undersigned, and those persons on behalf of whom I am signing this form have or may have by reason of our voluntary participation in the Wallkill River Regatta sponsored by the Village of New Paltz and the Town of New Paltz and I further agree to defend, indemnify and save harmless the Village of New Paltz and the Town of New Paltz from any liability, actions, causes of action, suits, claims or demands for damages or loss for personal injuries or for property damage arising directly or indirectly as the result of our participation in the Wallkill River Regatta.

I acknowledge that I am authorized, as parent or guardian, to sign this agreement on behalf of the following participants who are under the age of eighteen (18) years and I accept full responsibility on behalf of them:

**NAME    ADDRESS    DATE OF BIRTH**

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**IN WITNESS WHEREOF**, I have set my hand this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

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|           |              |         |
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| Signature | Printed Name | Address |
|-----------|--------------|---------|

STATE OF NEW YORK    )  
   ) ss.:  
 COUNTY OF ULSTER    )

On the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, the undersigned, a Notary Public in and for said State, personally appeared \_\_\_\_\_ personally know to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledges to me that he/she executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

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NOTARY PUBLIC