

**APPENDIX A  
STANDARD LIABILITY WAIVER**

**POLICY 1085**

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**New Brunswick Public Library Service  
Liability Waiver / Informed Consent Form**

I, \_\_\_\_\_, have enrolled in an activity offered through the New Brunswick Public Library Service.

I understand that safety will be a priority, and recognize that there are risks involved in this activity and in any activity. I hereby affirm that I have informed myself to my own satisfaction of the nature of the risks involved in the activity named below, and agree as follows:

In consideration of my participation in this activity, I, \_\_\_\_\_, hereby release the New Brunswick Public Library Service, the municipality of \_\_\_\_\_, and their staff, volunteers and agents from any claims, demands, and causes of action as a result of my voluntary participation and enrollment.

I fully understand that I may injure myself as a result of my enrollment and subsequent participation in this activity, and I, \_\_\_\_\_, on behalf of myself and my heirs, hereby release the New Brunswick Public Library Service and its agents from any liability now or in the future for injuries or conditions that I may obtain, except those caused by negligence.

I HEREBY AFFIRM THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE STATEMENTS.

\_\_\_\_\_  
(Participant's signature, or parent or guardian if under 19 years of age)

\_\_\_\_\_ (Witness) \_\_\_\_\_ (Date)

Activity Name:

Co-sponsors, if any:

Activity Dates:

Location of Activity: