

Participant's name: _____
PRINT

**HIDALGO COUNTY SHERIFF'S DEPARTMENT, ADULT DETENTION CENTER
701 EL CIBOLO ROAD, EDINBURG, TEXAS 78539**

HIDALGO COUNTY DETENTION FACILITY

WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT WAIVER:
In consideration of being permitted to participate in any way in

MINISTER'S / INSTRUCTOR'S / VOLUNTEER'S / VISITOR'S

Hereinafter called "The Activity" I, for myself, my heirs, my personal representatives or assigns, do hereby release, waive, discharge, and covenant not to sue the Hidalgo County Sheriff's Department, it's Officers, employees, and Agents from liability from any and all claims including the negligence of the Hidalgo County Sheriff's Department, it's Officers, employees, and Agents, resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in "The Activity".

Signature of Participant Date

Assumption of Risks: Participation in The Activity carries with it certain inherent risks that cannot be eliminated regardless of the taken to avoid injuries. Risks range from, minor injuries such as scratches, bruises, and sprains to catastrophic injuries including paralysis and death, also any disease, illness or infection acquired through participation with the Inmates.

I have read the previous paragraphs, and I know, understand, and appreciate these and other risks that are inherent in the activity. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.

Indemnification and hold harmless: I also agree to indemnify and hold the Hidalgo County Sheriff's Department **HARMLESS** from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of my involvement in The Activity and to reimburse them for any such expense incurred.

Severability: The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the Law of the State of Texas and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Acknowledgement of Understanding: I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing the agreement freely and voluntarily, and Intend, by my signature, to be a complete and unconditional release of all liability to the greatest extend allowed by law.

Signature of Participant Date