## WAIVER AND RELEASE OF LIABILITY

l,	, hereby acknowledge and agree	as follows:	
1. That, on	, 2017, I will participate in		I will not be required
to pay any fee to	participate in this activity.		
as a condition of e	at my participation in is remployment. I acknowledge that te part of my work related duties	the is a recreationa	
3. To the best of r	ny knowledge, I am in good heal	th and sufficient physical con-	dition to participate in
(including but not and the Departme my participation i any claim or laws from this activity.	e the State of Tennessee and its of Ilimited to the State, Local Educatent of Finance and Administration  uit in any court or administrative This release and waiver includes	ation, and Local Government n), from any and all liability re This means that I forum under any theory of la s claims based on allegations of	Insurance Committees elated to or arising from waive the right to bring law based on or arising
	is employees, agents, departmer all be interpreted under the laws		
I HAVE READ THIS TERMS	WAIVER AND RELEASE OF LIABI	LITY CAREFULLY AND AGREE 1	O BE BOUND BY ITS
	Date of sign	nature	
Signature witness	ed by:		