



Storm Drain Marking Program Liability Waiver

Name of participant: _____ (Please Print)

Date of Birth: _____

As a participant, or parent or legal guardian of a participant in the Storm Drain Marking Program sponsored by participating sponsors and co-sponsors, I, undersigned, hereby release, discharge, and agree to hold harmless the State of Texas, City of Mansfield, and all sponsors and co-sponsors, their agents, employees, officers, and successors from all liability, claims, or actions which I, my heirs, executors, administrators, or assigns may have or claim against any of them arising from any personal injuries or other claims connected therewith, whether known or unknown, or injuries to other persons or to property caused by or arising out of any actions I might take relating to my activities while participating in the above program.

I, the undersigned, do hereby release and authorize the use of any photographs taken of the participants listed below by the Mansfield Clean Water Project, their sponsors, or their contractors for the purpose of developing public information materials.

If the participant is a minor, I, as parent or legal guardian of the participant, further authorize the participating sponsors, co-sponsors and employees of the organizations to obtain medical treatment for the participant, should an apparent need for this treatment arise.

I have carefully read this release and understand all its terms; I sign it voluntarily and with full knowledge of its legal consequences.

Signature of participant (or Parent/Legal Guardian if minor under age 18):

Please return form to: Arianne Shipley, Environmental Specialist
1200 E. Broad St
Mansfield, Texas 76063
Phone (817)276-4297
Fax 817(453)8176
arianne.shipley@mansfield-tx.gov