ALAMEDA COUNTY EMPLOYEE WELLNESS ACTIVITY RELEASE AND WAIVER OF LIABILITY AGREEMENT

i,(Participant), acknowle	edge that I am voluntarily partic	ipating in the
following Wellness activities held on County facil	ity during my lunchtime and no	n work hours:
(Description of activities which Participant wood the activities)	ill engage in and building add	dress location
I have read the general safety guidelines and Questionnaire (PAR-Q). I have determined tha me.		
I AM AWARE THAT THERE ARE HAZARDS IN SERIOUSLY INJURED OR DIE AS A RESULT. THESE ACTIVITIES WITH KNOWLEDGE OF T INVOLVED, AND AGREE TO ASSUME ANY AI PROPERTY DAMAGE, WHETHER THOSE RIS RESULT OF MY PARTICIPATION.	I AM VOLUNTARILY PARTIC HE POTENTIAL AND INHERE ND ALL RISKS OF INJURY, D	CIPATING IN ENT RISK EATH OR
I verify this statement by placing my initials h	nere:	
As consideration for being permitted by the Couractivities and to use the County premises and fact Alameda, its Board of Supervisors, officials, a employees, volunteers, agents, contractors, a "Releasees") from any and all actions, worke demands that I, my assignees, heirs, distributed legal representatives now have, or may have damage, related to (i) my participation in these whether directly connected to these activities. Releasee, or (iii) the condition of the premises not I am then participating in the activities. I addistributees, guardians, next of kin, spouse and leagainst, sue, or attach the property of any Release covered by the foregoing release.	cilities, I forever release the Cadministrators, directors, mand representatives (collectives' compensation claims, othetees, guardians, next of kin, sin the future, for injury, deathete activities, (ii) the negligences or not, and however caused so where these activities occurates agree that I, my assignees egal representatives will not make the see in connection with any of the	ounty of nagers, rely ner claims or spouse and n, or property ne or other acts, n, by any r, whether or n, heirs, ne matters
I HAVE CAREFULLY READ THIS AGREEMEN CONTENTS. I AM AWARE THAT THIS IS A RE BETWEEN MYSELF AND THE COUNTY AND	LEASE OF LIABILITY AND A	CONTRACT
Executed at	, California on	, 20
EMPLOYEE PARTICIPANT		
Signature		
Name & Address:(Print)		