



Community Area Resource Enterprise Inc.
Gallup, New Mexico

RIDER WAIVER FORM

Date _____

Know all men by these present that I,

of the Town of _____,

county of _____, state of _____, in consideration of CARE 66 of Gallup, NM allowing me to participate in the CARE 66 Metric Century, do hereby covenant with the City of Gallup, the U.S. Government, their officers, agents and employees that I will never institute a suit, action at law, or make any claim against said CARE 66, City of Gallup, McKinley County, the US Government, their officers, agents or employees, their legal representatives heirs, executors, or administrators, for or by reason of any damage, loss or injury either to person or property or both, including but not limited to all doctor, medical, hospital and related expenses, loss of earning capacity, both present and future, whether developed or undeveloped, resulting or to result, known or unknown, which I now have or which I hereafter can, shall or may have for, on or be reason of any accident which may occur, when I am participating in said program. This covenant may be pleaded as a complete defense to any action or other proceeding which may be

Creating Opportunities to End Homelessness

PO Box 4298, Gallup, New Mexico 87305

Office: 505 722 0066

www.care66.org

<http://care66.blogspot.com/>

brought, instituted or taken by me against the CARE 66, the City of Gallup, McKinley County, the U.S. Government, their officers, employees or agents, their legal representatives, heirs, executors, or administrators, in breach of this covenant.

And in further consideration of participation in said program, I hereby agree to indemnify and save harmless the Gallup, the U.S. Government, their officers, agents and employees, their legal representatives, heirs, executors, or administrators, against any parties against CARE 66, the City of Gallup, McKinley County, the U.S. Government, their officers, agents or employees arising out of any alleged conduct of myself while participating in the program and to reimburse or make good any loss or damages or costs that the said CARE 66, City of Gallup, McKinley County, U.S. Government, their officers, agents, or employees their legal representatives, heirs, executors or administrators, may have to pay if any litigation arises on account of any claims made by said third party.

Print Name _____

Signature _____