



Multi-Purpose Facility Kitchen Waiver Release Form
Southern Ute Indian Tribe
256 Ute Road,
Ignacio, CO 81137
970-563-4784 (direct line) or 970-563-0100 ext. 2640



Parent or Legal Guardian Name: _____ Date _____

Address: _____ Contact Numbers 1) _____ 2) _____

User Event _____ Date of Event _____

By signing my name below I hereby acknowledge I am the parent or legal guardian of _____ who is under the age of eighteen (18). I hereby assume all risks for allowing him/her to participate in the activities in the Multi- Purpose Facility Kitchen. By signing, I agree to indemnify and hold harmless the Tribe, Tribal Council and the Tribe's employees, agents, and representatives from any and all claims, damages, losses and expenses of every nature made against the Tribe arising out of services provided pursuant to the use of the facility and is not responsible for any thefts or damage to personal property that may occur during the use of the facility. Including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the above mentioned being released, from dangerous or defective equipment or property owned, maintained, or controlled by the Southern Ute Indian Tribe.

_____	_____	_____
Name	Relationship	Date
2/14/12		



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