



OFFICE USE ONLY

Amount of Rent Paid: \_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_

Amount of Deposit Paid: \_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_

Key Returned: \_\_\_\_\_ Deposited Returned on: \_\_\_\_\_

Deposit retained – Explanation: \_\_\_\_\_

**CITY OF VALLEY MILLS, TEXAS**

**RELEASE OF CLAIMS AND WAIVER OF LIABILITY  
FOR USE OF PARK FACILITY**

I, \_\_\_\_\_, am over the age of eighteen (18) and here by  
(print your name)  
state that I am renting or using a City of Valley Mills (“City”) owned park facility, specifically,  
the \_\_\_\_\_ (the “Park Facility”),  
for the period from \_\_\_\_\_ to \_\_\_\_\_.

As a condition of the City agreeing to such rental and/or use, I agree to abide by all rules and regulations set forth by the City, its agents, employees, representatives or assigns - whether written or unwritten, and further agree to use all necessary care and caution for myself and to supervise all others using the Park Facility under my rental, before, during and after any activities I or others participate in, or undertake while renting or using the Park Facility.

**I fully understand that the City will not be held responsible for any injuries or property damage resulting from, caused by, arising out of, or in any way related to, my rental or use of the Park Facility or such use by others participating in my rental or use of the Park Facility.**

**On behalf of myself, my heirs, assigns and agents, and others participating in my rental or use of the Park Facility, I hereby forever release and discharge the City, its officials, employees, volunteers, council members or agents from any and all claims or liability from loss, injury ( including death) or damages to persons or property sustained while I am renting or using the Park Facility, or while using any equipment or facilities of the City, EVEN IF SUCH CLAIM, LOSS OR INJURY ARISES OUT OF OR IS CONNECTED WITH THE NEGLIGENCE OR GROSS NEGLIGENCE OF THOSE PERSONS AND ENTITIES RELEASED ABOVE.**

Signature

Date:

Printed Name

Address

City, State, Zip Code

Witnessed by (signature)

Date

Printed Name

Address

City, State, Zip Code

RV's License Plate #

Registered Owner's Full Name

*(Copy of Driver's license must also be turned in to the office prior to rental)*