



RESIDENT ACADEMY APPLICATION

Please complete all sections of this application and submit via email to: jherrera@cityofartesia.us

Full Name (First, Last)

Mailing Address (Business/Home (*circle one*))

Email

Phone (Business/Home (*circle one*))

How did you learn about the Resident Academy Program? (*Check all that apply*)

- Instagram Facebook City website
 Artesian Newsletter E-Artesian Other: _____

Are you a member of a community/civic organization?

- Yes No If yes, which one? _____

What Academy topics most interest you?

- City Government 101 Planning and Housing
 Maintenance and Sustainability Community Preservation (Code Enforcement)
 Public Safety Parks and Recreation
 Other: _____

WAIVER, RELEASE, HOLD HARMLESS, AND AGREEMENT NOT TO SUE

I, _____ (FULL NAME), fully understand that my participation in the **Academies** (hereinafter "event/class") exposes me to the risk of personal injury, death, communicable diseases, illnesses, viruses, or property damage. I hereby acknowledge that I am voluntarily participating in the event/class and agree to assume any such risks.

I hereby release, discharge and agree not to sue City of Artesia and/or its officials, officers, employees, volunteers, representatives, and agents (collectively, "City") for any injury, death or damage to or loss of personal property arising out of, or in connection with, my participation in the event/class from whatever cause, including the active or passive negligence of City or any other participant in the event/class.

In consideration for being permitted to participate in the event/class, I hereby agree, for myself, my heirs, administrators, representatives, agents, executors, successors, and assigns, that I shall indemnify and hold harmless the City from any and all claims, demands actions or suits arising out of or in connection with my participation in the event/class.

I HAVE CAREFULLY READ THIS WAIVER, RELEASE, HOLD HARMLESS AND AGREEMENT NOT TO SUE, AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A FULL RELEASE OF ALL LIABILITY AND SIGN IT ON MY OWN FREE WILL.

Signature

Date