



**Touch-A-Truck**  
**Saturday, May 18, 2024**  
Stanley T. Williams Community Center  
1332 Middletown Avenue, Northford  
*Trucks MUST be parked by 10:00 a.m.*  
Event runs from 11:00 a.m. to 1:00 p.m.  
*(12:30-1:00 – Quiet Time)*



Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Business Name: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

<u>Type of Vehicle</u>	<u>Dimensions of Vehicle</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

**Requirements on the day of:**

- **Wheel Chocks in place**      • **Engine turned off**
- **Keys out of ignition**      • **Emergency brake on**

**Waiver of Liability, Release Assumption of Risk & Indemnity Agreement**

Participants acknowledge, understand and assume all risks inherent in the TOUCH-A-TRUCK event conducted at the North Branford Auditorium Parking Lot and sponsored by the North Branford Recreation Department on May 18, 2024.

Participant acknowledges, understands and assumes the risks, if any, arising from the conditions of this Touch-A-Truck event and related premises and acknowledge and understand that included within the scope of this waiver and release is any cause of action arising from the performance or the failure to perform supervision or control of said premises and for the failure to warn of dangerous conditions existing at said event, for negligent selection of certain releasees or negligent supervision or instruction by releasees. It is further acknowledged that there may be risks and dangers not known to us, or are not reasonably foreseeable at this time.

It is the purpose of this agreement to exempt, waive and relieve releasees from liability for personal injury, property damage and wrongful death caused by negligence, including the negligence, if any, of releasees. "Releasees" include The Town of North Branford, program supervisors, other participants, volunteers, officials and operators of the premises used to conduct this event.

Participants acknowledge that they have been provided with and have read the above paragraphs and have not relied upon any representations of releasees, that they are fully advised of the potential dangers of this event and understand these waivers and releases are necessary to allow this program to exist in its present form.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**PLEASE EMAIL, FAX, OR RETURN THIS FORM BY MAY 10, 2024**

**Email: recreationsecretary@townofnorthbranfordct.com Fax: (203) 484-1063**