



**MIDDLESEX BEACH ASSOCIATION  
BEACH ACCESSIBLE WHEELCHAIR WAIVER, INDEMNITY AND RELEASE OF LIABILITY FORM**

In consideration of the use of the Beach Accessible Wheelchair, I/We, the undersigned \_\_\_\_\_ (user(s) and/or parent(s)/guardian(s)/friend(s), hereinafter collectively referred to in the singular), understand, acknowledge and expressly agree that my use of the Beach Accessible Wheelchair offered by the Middlesex Beach Association involves the risk of injury to me whether caused by me or not. I understand that these risks can range from minor injuries to major injuries, including death. In consideration of my participation in the activities and use of the Beach Accessible Wheelchair offered by the Middlesex Beach Association, I understand, acknowledge and voluntarily accept and assume this risk and agree that the MBA, its directors, members, employees, agents and volunteers (hereinafter collectively "MBA") will not be liable for any injury to or damages incurred by the undersigned, including, without limitation, personal, bodily, or mental injury, and/or damages to my person or property of any kind, resulting from the actions, inactions or negligence of the MBA, its directors, members, employees, agents and volunteers or anyone acting on the MBA's behalf, whether related to the Beach Accessible Wheelchair, its design, maintenance or operation. Accordingly, I do hereby forever **RELEASE, DISCHARGE, INDEMNIFY AND HOLD HARMLESS** the MBA, its directors, members, employees, agents and volunteers from any and all claims, demands, injuries, damages, attorney's fees and costs, actions or causes of action, including, but not limited to, any negligence by the MBA, its directors, members, employees, agents and volunteers. I further understand and acknowledge that the MBA did not design or manufacture the Beach Accessible Wheelchair and/or any equipment related or attached thereto, but only permitted its use as requested by me in an "as is" condition, and, accordingly, I accept full responsibility for using the Beach Accessible Wheelchair and/or any equipment

related or attached thereto in an “as is” condition and the MBA, its directors, members, employees, agents and volunteers may and shall not be held liable for any defect of any kind.

THE UNDERSIGNED ACKNOWLEDGES THAT HE/SHE HAS CAREFULLY READ THIS “BEACH ACCESSIBLE WHEELCHAIR WAIVER, INDEMNITY AND RELEASE OF LIABILITY FORM” AND FULLY UNDERSTANDS THAT IT IS A RELEASE OF LIABILITY AND EXPRESS ASSUMPTION OF RISK AND INDEMNIFICATION. THE UNDERSIGNED IS AWARE AND AGREES THAT BY EXECUTING THIS WAIVER AND RELEASE, HE/SHE IS GIVING UP THE RIGHT TO BRING LEGAL ACTION OR ASSERT A CLAIM AGAINST THE MBA FOR ITS ACTION, INACTION OR NEGLIGENCE AND/OR FOR ANY DEFECT IN THE BEACH ACCESSIBLE WHEELCHAIR AND/OR ANY EQUIPMENT RELATED OR ATTACHED THERETO, ITS MAINTENANCE, OR ITS OPERATION, OR ON ITS PREMISES. BY SIGNING BELOW, THE UNDERSIGNED SIGNIFIES THAT HE/SHE HAS READ AND VOLUNTARILY SIGNED THIS AGREEMENT AND THAT NO ORAL REPRESENTATIONS, STATEMENTS, OR INDUCEMENTS IN ADDITION TO OR APART FROM THE FOREGOING AGREEMENT HAVE BEEN MADE.

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Printed Name of Wheelchair User

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Date

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User Signature

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Printed Name of Parent/Guardian/Friend

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Date

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Parent/Guardian/Friend Signature



## **BEACH ACCESSIBLE WHEELCHAIR SIGN OUT FORM**

**Date of Use:** \_\_\_\_\_ **Time of Use:** \_\_\_\_\_

**Condition:** \_\_\_\_\_ **Initials:** \_\_\_\_\_

**Return Date:** \_\_\_\_\_ **Time of Return:** \_\_\_\_\_

**Condition:** \_\_\_\_\_ **Initials:** \_\_\_\_\_

**Required Information (Person (or parent/guardian/friend) utilizing the Beach Accessible Wheelchair must complete the following):**

**Name:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

**Local Address:** \_\_\_\_\_

**Beach Pass #:** \_\_\_\_\_

**Cell Phone #:** \_\_\_\_\_