

BLOUNT COUNTY SHERIFFS OFFICE TRAINING CENTER



Indemnity/Hold Harmless Agreement

To the fullest extent permitted by law, the undersigned person ("person" shall include the parent(s) or guardian(s) of a minor participating in the described event or activity) agrees to indemnify and hold Blount County, Tennessee, its elected and appointed officials, employees and volunteers and others working on behalf of Blount County, Tennessee, (hereinafter collectively "Blount County") harmless from and against all loss, cost, expense, damage, liability or claims, whether based on tort, contract or other theory of recovery), arising out of the **Blount County Sheriffs Office Training Center**, including any bodily injury, sickness or disease (including death resulting at any time therefrom) which may or could be claimed by the undersigned person or any person claiming by or through the undersigned person and damage or destruction of any property which may or could be claimed by the undersigned person or any person claiming by or through the undersigned person, including the loss of use thereof, based on any act or omission, negligent or otherwise, of Blount County, in connection with or incident to the **Blount County Sheriffs Office Training Center** scheduled for ___ / ___ / ___ (date), except that the undersigned person shall not be required to indemnify Blount County for damages caused or resulting from the sole gross negligence of Blount County. The undersigned person shall, at his/her own cost and expense, defend Blount County from and against any such claims and any suit, action or proceeding which may be commenced thereunder, and the undersigned person shall pay any and all judgments which may be recovered in any such suit, action or proceeding, and any and all expenses including, but not limited to costs, attorney's fees and settlement expenses which may be incurred therein.

Name of Person (or as appropriate the Custodial Parent or Legal Guardian of a Minor):

Print Name & Sign: _____

Date: / /

Current Address: _____

Phone #: _____

Authorized Employee, Print & Sign: _____