**Liability Release Form**

**Mutual Liability Release form**

[Company/Organization Name] Mutual Liability Release Form

[Date of Release Form]

**Agreement overview:**

I, [Releasor's Full Name], hereby agree to release and discharge [Company/Organization Name] and its officers, directors, employees, agents, successors, and assigns (collectively referred to as "Releasee") from any and all claims, demands, actions, causes of action, suits, liabilities, costs, and expenses, both at law and in equity, whether known or unknown, arising out of or in connection with:

1. [Description of the activity or event for which the release is being signed]
2. [Additional specific activities, events, or circumstances to be included]

I understand and acknowledge that participating in the aforementioned activities/events involves certain risks and hazards. By signing this release form, I assume all risks associated with these activities/events and waive any claim or cause of action against the Releasee for any personal injury, property damage, or other loss that may occur as a result of my participation.

Furthermore, I agree to indemnify and hold harmless the Releasee from any liability, loss, damage, or expense, including legal fees, that may arise out of my participation in the aforementioned activities/events.

**Terms and conditions:**

This release shall be binding upon me, my heirs, executors, administrators, and assigns. I acknowledge that I have carefully read and fully understand the contents of this release form, and I voluntarily and knowingly execute it without any coercion or duress.

If any provision of this release form is deemed invalid or unenforceable, the remaining provisions shall continue to be valid and enforceable to the fullest extent permitted by law.

**Acknowledgement:**

I have read and understood this Mutual Liability Release Form and hereby execute it as of the date first written below.

**Concerned Parties Signature:**

|  |  |
| --- | --- |
| **Releasor's Full Name:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Witness: Witness Name:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Releasor's Signature:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Witness Signature:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Date:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Date:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |