

**CITY OF BIG RAPIDS
HOLD HARMLESS AGREEMENT**

Names and Address of _____
Individual/Firm/Organization _____
Phone No. _____

EVENT: _____

DATE: _____

TIME: _____

LOCATION: _____

The above named individual/firm/organization shall indemnify and hold harmless the City of Big Rapids and any employee thereof, from all suits, claims and actions for damages of every name or description brought or claimed against it for or on account of any injury or damage to person or property received or sustained by any party or parties, by or from any of the acts or omissions or through the negligence of said individual/firm/organization/his/her/its agents or employees, which arise out of the circumstances of

(describe event, incident, or activity in which the person or entity will be participating)

SPONSOR'S SIGNATURE: _____

Signed and Sworn this _____ day of _____, 20____.

Notary Public
County of _____
Commission expires: _____

(Please remember this form has to be signed in the presence of a Notary Public.)