



**PARKS COMMISSION
VIA VIDEOCONFERENCE
Tuesday, March 2, 2021
6:30 p.m.**

**IMPORTANT NOTICE REGARDING
PUBLIC ACCESS & PARTICIPATION**

On March 20, 2020, City Manager Gregory Rose declared a State of Emergency for the City of University City due to the COVID-19 Pandemic. Due to the ongoing efforts to limit the spread of the COVID-19 virus, the March 2, 2021 meeting will be conducted via videoconference.

Observe and/or Listen to the Meeting (your options to join the meeting are below):

Webinar via the link below:

<https://us02web.zoom.us/j/82829606335?pwd=T1F3SU5JTnBxN3NuTlI1czlJNkJKQT09>

Audio Only Call

Or iPhone one-tap :

US: +19292056099,,82829606335#,,,,*610803# or +13017158592,,82829606335#,,,,*610803#

Or Telephone:

Dial(for higher quality, dial a number based on your current location):

US: +1 929 205 6099 or +1 301 715 8592 or +1 312 626 6799 or +1 669 900 6833 or +1 253 215 8782 or +1 346 248 7799 or 888 788 0099 (Toll Free) or 877 853 5247 (Toll Free)

Webinar ID: 828 2960 6335

Passcode: 610803

International numbers available: <https://us02web.zoom.us/j/82829606335?pwd=T1F3SU5JTnBxN3NuTlI1czlJNkJKQT09>

Citizen Participation and Public Hearing Comments:

Those who wish to provide a comment during the "Citizen Participation" portion as indicated on the agenda; may provide written comments to the Darren Dunkle ahead of the meeting.

ALL written comments must be received **no later than 12:00 p.m. the day of the meeting.** Comments may be sent via email to: ddunkle@ucitymo.org, or mailed to the City Hall – 6801 Delmar Blvd. – Attention Darren Dunkle, Director of Parks, Recreation and Forestry. Such comments will be provided to Board/Commission member prior to the meeting. Comments will be made a part of the official record and made accessible to the public online following the meeting.

Please note, when submitting your comments, a **name and address must be provided.** Please also note if your comment is on an agenda or non-agenda item. If a name and address are not provided, the provided comment will not be recorded in the official record.

The City apologizes for any inconvenience the meeting format change may pose to individuals, but it is extremely important that extra measures be taken to protect employees, residents, and elected officials during these challenging times.

AGENDA – March 2, 2021

A. MEETING CALLED TO ORDER

B. ROLL CALL

C. APPROVAL OF AGENDA

D. CITIZEN PARTICIPATION

Procedures for submitting comments for Citizen Participation and Public Hearings:

ALL written comments must be received **no later than 12:00 p.m. the day of the meeting.** Comments may be sent via email to: ddunkle@ucitymo.org, or mailed to the City Hall – 6801 Delmar Blvd. – Attention Darren Dunkle, Director of Parks, Recreation and Forestry. Such comments will be provided to Parks Commission members prior to the meeting. Comments will be made a part of the official record and made accessible to the public online following the meeting *Please note, when submitting your comments, a **name and address must be provided.** Please also not if your comment is on an agenda or non-agenda item. If a name and address are not provided, the provided comment will not be recorded in the official record.*

E. NEW BUSINESS

- 1) Insurance Requirements for Facilities
- 2) Waiver Requirements

F. ADJOURNMENT

DRAFT



AGENDA ITEM COVER

MEETING DATE: February 26, 2021

AGENDA ITEM TITLE: Insurance

AGENDA SECTION: New Business

BACKGROUND REVIEW:

The sovereign immunity limits for public entities are calculated by the State of Missouri and published annually in the Missouri Register per Section 537.610 RSMo. For 2021, the amount for all claims arising out of a single accident or occurrence is \$2,940,868, and for any one person in a single accident or occurrence is \$441,130.

As a standard practice, the city like most municipalities require organized users of facilities, construction contractors, special event/use activities, etc. to provide limits equal to or greater than the sovereign immunity limits to protect and limit themselves from potential lawsuits.

DIRECTION:

The City Council and City Manager has directed the Parks Commission to provide the City Council with a recommendation on moving forward with enforcement of waiver requirements to seek a balance between protecting the city and recognizing these could be new requirements for some organizations using city facilities.

DISCUSSION:

- 1) Current Rules state "Insurance May be Required" according to guidelines.
 - a. Should Parks Commission be involved in setting/changing those guidelines?
 - b. What should guidelines be?
- 2) If insurance is required, what should the limits of insurance be and what types?
- 3) Should the lessee be required to indemnify the City?
- 4) What should be the scope of the indemnity?
 - a. Just for injuries arising out of activity, or for any injury to any participant, spectator, even if caused by City's negligence.

ACTION:

There must be a motion and a second by a Commission member to make a recommendation and the motion must be approved by the majority of the Commission.

ATTACHEMENTS:

- 1) Insurance Requirements.



AGENDA ITEM COVER

MEETING DATE: February 26, 2021

AGENDA ITEM TITLE: Facility Waivers

AGENDA SECTION: New Business

BACKGROUND REVIEW:

With the outbreak of the COVID-19 pandemic, the City has identified the need to reopen in a safe manner, and do not want to facilitate the coronavirus spreading. Furthermore, the City is trying to immunize ourselves from a lawsuit and be indemnified against possible COVID related lawsuits in case any organization using our facilities isn't following St. Louis County Health Guidelines. Therefore, the City implemented a requirement that all outside organizations would need to sign a waiver on behalf of the organization, as well as all individual participants would need to sign a waiver as well.

DISCUSSION:

- 1) Waiver requirement for all participants?
- 2) Should participant waivers be required for field rental?
- 3) Should a waiver requirement be added to the official "Rules and Regulations" for facility rental?
- 4) How enforced?
- 5) Scope of Waivers?
 - a. Just for injuries arising out of activity, or for any injury to any participant, spectator, even if caused by the City's negligence.
- 6) Should waivers be required for use of any City facility, including Ruth Park, tennis, Centennial Commons room rentals, Community Center rentals?

ACTION:

There must be a motion and a second by a Commission member to make a recommendation and the motion must be approved by the majority of the Commission.

ATTACHEMENTS:

- 1) Waivers



ATHLETIC FIELD INSURANCE REQUIREMENTS

It is understood that the Permittee shall obtain and maintain insurance as outlined below, covering the activity/activities associated with the activity/activities. **Permittee shall furnish proof of coverage prior to the issuance of a Permit.**

All insurance coverage's are to be written/placed by insurance carriers licensed and admitted to do business in the State of Missouri with an A:VII or better rating in accordance with the current Best Key Rating Guide, covering all activity/activities under the Agreement, and all policies shall be endorsed to the state that coverage shall not be cancelled, non-renewed, or limits or coverage reduced without (60) days advance written notice by certified mail, return receipt requested, to the City of University City Parks, Recreation and Forestry Department.

Permittee shall not commence activity/activities under the Permit until all applicable insurance requirements and limits specified have been approved by the City. Permittee shall, during the term of this Permit, at its own expense, shall procure and maintain insurance as follows:

1. Comprehensive General Liability and Bodily Injury
Including Death: \$450,000 for any one person in a single accident or occurrence
\$3,000,000 out of a single accident or occurrence
Property Damage: \$450,000 for any one person in a single accident or occurrence
\$3,000,000 out of a single accident or occurrence
2. Owner's Protective Bodily Injury
Including Death: \$450,000 for any one person in a single accident or occurrence
\$3,000,000 out of a single accident or occurrence
Property Damage: \$450,000 for any one person in a single accident or occurrence
\$3,000,000 out of a single accident or occurrence

Workers Compensation Insurance – Activity/activities involving the use of Permittee employees and/or contracted employees will be required to provide Workers Compensation Insurance covering all employees, in accordance with the laws of the State of Missouri.

Permittee shall provide the Parks, Recreation and Forestry Department Department with a "Certificate of Insurance" naming the City of University City as additional/coinsured on a primary, non-contributory basis and must be submitted for the activity/activities location(s) and date(s) of all preparation for such activity/activities occurring on City of University City property.

The City of University City shall also be provided an endorsement page.

- **Endorsement** must include reference to the Policy Number and the Insured as they appear on the Certificate.

- **Additional Covered Party:** Name of Person or Organization: City of University City, officers, agents, and employees of the City of University City, individually and collectively.
- **Primary Insurance:** The Endorsement must state that coverage afforded by this endorsement shall apply as Primary. Other insurance maintained by the City of University City shall be excess only and not contributing with the insurance provided under this policy.

Certificates of insurance shall be filed with the City prior to commencement of this Permit and Permittee shall submit, during the course of this Permit, at least fifteen (15) days prior to the expiration of any insurance policy, a certificate indicating and evidencing either a renewal or a new policy. City shall be named as an additional insured and it shall provide that the insurer shall, at least thirty (30) days prior to the expiration, amendment, or cancellation of any such policy, give the City notice in writing of such expiration, amendment, or cancellation.

From: [Darren Dunkle](#)
To: [Carl Hoagland \(cwhoagland@yahoo.com\)](#); [James Wilke \(coachjameswilke@gmail.com\)](#); [Jay Redd](#); [Lisa Hummel \(lisahummel@sbcglobal.net\)](#); [LaRette Reese](#); [Margaret "Meg" Ullman \(megullman@gmail.com\)](#); [Steve McMahon](#); [Su Schmalz \(suschmalz@gmail.com\)](#)
Cc: [Lynda Euell-Taylor](#); [John F Mulligan](#)
Subject: Citizen Comments
Date: Tuesday, March 2, 2021 12:34:59 PM
Attachments: [Agenda Item Cover - Citizen Participation \(O'Hara\).pdf](#)
[Agenda Item Cover - Citizen Participation \(Platt\).pdf](#)
[Agenda Item Cover - Citizen Participation \(Taylor\).pdf](#)
[Waiver Requirements Citizens Comment.pdf](#)
[Agenda Item Cover - Citizen Participation \(McLure\).pdf](#)
[2020 U City Athletic Field Reservation form.pdf](#)
[2021 SPRING ATHLETIC FIELD USES.pdf](#)
[2021 Liability Waiver - Non-Sponsored Participant.pdf](#)
[2021 Liability Waiver - Non-Sponsored Participant-VISITORS.pdf](#)
[2021 Facility Liability Waiver - Organization.pdf](#)
[2021 DPRF-ATHLETIC FIELD REGISTRATION FORM -fillable 11321.pdf](#)
[2021 COVID 19 Athletic Field Use Information.pdf](#)
[2021 Athletic Field Rules and Regulations.pdf](#)
[2021 Athletic Field Insurance Requirements.pdf](#)
[2021 Olivette Park Pavilion Rental Form.pdf](#)
[March 2 UCYAC Parks Commission submission.pdf](#)
Importance: High

Dear Commission Members,

Please see the attached Citizen Comments and Attachments for tonight's meeting.

Regards,



Darren Dunkle CPRP AFO

Director of Parks, Recreation and Forestry

City of University City

6801 Delmar Boulevard

University City, MO 63130

P: 314-505-8552 | www.ucitymo.org



www.facebook.com/universitycityrecreationdivision

The information transmitted (including attachments) is covered by the Electronic Communications Privacy Act, 18 U.S.C. 2510-2521, is intended only for the person(s) or entity/entities to which it is addressed and may contain confidential and/or privileged material. Any review, retransmission, dissemination or other use of, or taking of any action in reliance upon, this information by persons or entities other than the intended recipient(s) is prohibited. If you received this in error, please contact the sender and delete the material from any computer.



ORGANIZATION FACILITY RENTAL LIABILITY WAIVER

Notice: THIS IS A LEGALLY BINDING AGREEMENT: Read this document solicit and its entirety. By signing this agreement, you give up your right to bring a court action to recover compensation or obtain any other remedy for any personal injury or property damage however caused arising out of your rental of facilities in City of University City (University City) for programs/activities now or at any time in the future.

ASSUMPTION OF RISK

_____ hereby acknowledges and agrees that renting of facilities in University City comes with inherent risks. _____ have full knowledge and understanding of the inherent risks associated with renting University City facilities, including but in no way limited to: (1) slips, trips and falls (2) athletic injuries, (3) aquatic injuries, (4) illness, including exposure to and infection with viruses or bacteria.

_____ further acknowledge that the preceding list is not inclusive of all possible risks associated with program participation and facility use and that said list in no way limits the operation of this agreement.

CORONAVIRUS/COVID -19 WARNING DISCLAIMER, AND CUSTOMER WARRANT

Coronavirus, Covid-19 is an extremely contagious virus that spreads easily through person to person contact. Federal and State authorities recommend social distancing to prevent the spread of the virus. COVID-19 can lead to severe illness, personal injury, permanent disability and death. Leasing University City facilities or participating in programs/activities could increase the risk of contracting COVID -19. University City in no way warrants that COVID -19 infection will not occur through the lease of University City facilities or participation in programs/activities.

The undersigned hereby agrees, represents and warrants that neither the undersigned organization/individual nor such participating individuals shall visit or utilize the facilities, services of University City within 14 days after (1) returning from highly impacted areas subject to a CDC level 3 Travel Health Notice (2) exposure to any person returning from area subject to a CDC level 3 travel health notice or (3) exposure to any person who has a suspected or confirmed case of COVID-19. The CDC Travel Health Network is continuously updating this list and the undersigned agrees that they are aware of this list and the countries listed.

The undersigned agrees to check the CDC travel health network notices list prior to utilizing the facilities of University City, on a daily basis if necessary. The undersigned hereby agrees, represents and warrants that neither the undersigned organization/individual nor such participating individuals shall visit or utilize the facilities of University City if he or she (1)

experience symptoms of COVID -19, including , without limitation, fever, cough, or shortness of breath, or (2) has a suspected or diagnosed/confirmed case of COVID-19. The undersigned agrees to notify University City immediately if he or she believes that any of the foregoing access/use restrictions may apply. The undersigned acknowledges and assumes both the known and potential dangers of utilizing the facilities of University City and acknowledges that use thereof by the undersigned organization/individual and/or such participating individuals may, despite the University City reasonable efforts to mitigate such dangers, result in exposure to COVID-19, which could result in quarantine requirements, serious illness, disability and/or death.

The undersigned has read, understands, and agrees to abide by and enforce all St. Louis County Health Department Guidelines for their facility use and permit length. The undersigned understands it is their full responsibility, as permit holder, that anyone participating within their permit must abide by the mentioned guidelines and is the permit holder's duty to enforce the guidelines. Failure to abide by the mentioned guidelines will result in removal from facilities, cancelled permits, and forfeiture of any monies or refund.

In consideration of _____ use of University City facilities, _____, the undersigned lessee, knowingly and voluntarily agrees to release and on behalf of my organization, myself, any participating individuals, my heirs, representatives, executors, administrators and assigns HEREBY DO RELEASE UNIVERSITY CITY, its officers, directors, employees, volunteers, agents, representatives and insurers from any cause of action, claims, or demands of any nature whatsoever including, but in no way limited to , claims of negligence, which I, my heirs, representatives, executors, administrators and assigns may have, now or in the future, against University City on account of personal injury, property damage, death, or accident of any kind, arising out of or in any way related to the use of University City facilities/equipment or whether that participation is supervised or unsupervised, however the injury or damaged occurs, including but not limited to the negligence of releases. THE UNDERSIGNED HEREBY ASSUMES ALL RESPONSIBILITY FOR AND RISK OF ILLNESS, BODILY INJURY, DEATH OR PROPERTY DAMAGE to the undersigned or such participating individuals due to negligence, active or passive, or otherwise while in, about or upon the premises of University City and/or while using the premises or any facilities or equipment with University City. The undersigned acknowledges that any illness or injuries that the undersigned or such participating individuals' contract or sustain may be compounded by negligence first aid or emergency response of the releases and waive any claim in respect thereof.

In consideration of my organization's facility rental in University City or access to facilities. I, the undersigned lessee agrees to INDEMINIFY AND HOLD HARMLESS releases from any and all cause of action, claims, demands, losses, or costs of any nature whatsoever arising out of or in any way related to my programs/activity's participation or access to facilities. I hereby certify that I have full knowledge of the nature and extent of the risks inherent in participation and

facility use and that _____ is voluntarily assuming said risks. I understand that _____ will be solely responsible for any loss or damage, including personal injury, property damage, or death that participants may sustain while participating in programs/activities or facilities use in University City and that by signing this agreement, _____ HEREBY RELEASE releases from all liability for such loss, damage, or death.

I HAVE CAREFULLY READ AND VOLUNTARILY SIGN THIS ASSUMPTION OF RISK, RELEASE AND WAIVER OF LIABILITY, ST. LOUIS COUNTY HEALTH DEPARTMENT GUIDELINES, AND INDEMNIFY AGREEMENT AND FURTHER AGREE THAT NO ORAL REPRESENTATIONS, STATEMENTS OR INDUCEMENT APART FROM THE FOREGOING WRITTEN AGREEMENT HAVE BEEN MADE. I AM AWARE THAT BY AGREEING TO THIS AGREEMENT _____ IS GIVING UP VALUABLE LEGAL RIGHTS, INCLUDING THE RIGHT TO RECOVER DAMAGES FROM UNIVERSITY CITY OF ILLNESS, DEATH OR PROPERTY DAMAGE, INCLUDING FOR THE AVOIDANCE OF DOUBT AND WITHOUT LIMITATION. EXPOSURE TO COVID-19 AT ANY UNIVERSITY CITY FACILITY OR PROGRAM AND ANY ILLNESS, INJURY OR DEATH RESULTING THEREFROM.

_____ UNDERSTANDS THAT THE DOCUMENT IS A PREMISE NOT TO SUE AND A RELEASE OF AND INDEMNIFICATION FOR ALL CLAIMS. IF SIGNING ON BEHALF OF MINORS: _____ UNDERSTANDS THAT THIS AGREEMENT IS MADE ON BEHALF OF MY ORGANIZATION AND I REPRESENT AND WARRANT TO UNIVERSITY CITY THAT I HAVE FULL AUTHORITY TO SIGN THIS AGREEMENT ON BEHALF OF THE ORGANIZATION.

IN WITNESS WHEREOF, THIS INSTRUMENT IS DULY EXECUTED THIS _____ DAY OF _____ IN THE YEAR _____.

LESSEE SIGNATURE _____

LESSEE NAME (print clearly) _____

ORGANIZATION (print clearly) _____

ADDRESS _____ CITY _____ Zip _____

PHONE NUMBER _____



PARTICIPANT LIABILITY WAIVER

Notice: THIS IS A LEGALLY BINDING AGREEMENT: Read this document solicit and its entirety. By signing this agreement, you give up your right to bring a court action to recover compensation or obtain any other remedy for any personal injury or property damage however caused arising out of your participation in programs/activities held at the City of University City (University City) now or at any time in the future.

ASSUMPTION OF RISK

I hereby acknowledge and agree that participation in programs/activities held at University City comes with inherent risks. I have full knowledge and understating of the inherent risks associated with participation in programs/activities held at University City, including but in no way limited to: (1) slips, trips and falls (2) athletic injuries, (3) aquatic injuries, (4) illness, including exposure to and infection with viruses or bacteria. I further acknowledge that the preceding list is not inclusive of all possible risks associated with program/activity participation and facility use and that said list in no way limits the operation of this agreement.

CORONAVIRUS/COVID -19 WARNING DISCLAIMER, AND CUSTOMER WARRANT

Coronavirus, Covid-19 is an extremely contagious virus that spreads easily through person to person contact. Federal and State authorities recommend social distancing to prevent the spread of the virus. COVID-19 can lead to severe illness, personal injury, permanent disability and death. Participating in in programs/activities held at University City or accessing University City facilities could increase the risk of contracting COVID -19. University City in no way warrants that COVID -19 infection will not occur through participation in programs/activities held at University City or accessing University City Facilities.

The undersigned hereby agrees, represents and warrants that neither the undersigned nor such participating children shall visit or utilize the facilities, services, and programs held at University City within 14 days after (1) returning from highly impacted areas subject to a CDC level 3 Travel Health Notice (2) exposure to any person returning from area subject to a CDC level 3 travel health notice or (3) exposure to any person who has a suspected or confirmed case of COVID-19. The CDC Travel Health Network is continuously updating this list and the undersigned agrees that they are aware of this list and the countries listed.

The undersigned agrees to check the CDC travel health network notices list prior to utilizing the facilities, services, and programs/activities held at University City, on a daily basis if necessary. The undersigned herby agrees, represents and warrants that neither the undersigned nor such participating children shall visit or utilize the facilities, services, and programs/activities at University City if he or she (1) experience symptoms of COVID -19, including , without limitation, fever, cough, or shortness of breath, or (2) has a suspected or diagnosed/confirmed

case of COVID-19. The undersigned agrees to notify University City immediately if he or she believes that any of the foregoing access/use restrictions may apply. The undersigned acknowledges and assumes both the known and potential dangers of utilizing the facilities, services, and programs/activities held at University City and acknowledges that use thereof by the undersigned and/or such participating children may, despite the University City reasonable efforts to mitigate such dangers, result in exposure to COVID-19, which could result in quarantine requirements, serious illness, disability and/or death.

The undersigned has read, understands, and agrees to abide by all St. Louis County Public Health Guidelines for their program/activities. The undersigned understands it is their full responsibility to abide by the mentioned guidelines. Failure to abide by the mentioned guidelines will result in removal from facilities, cancelled participation, and forfeiture of any monies or refund.

In consideration of my participation in programs/activities held at University City facilities, I, the undersigned participant, knowingly and voluntarily agrees to release and on behalf of myself, any participating children, my heirs, representatives, executors, administrators and assigns HEREBY DO RELEASE UNIVERSITY CITY, its officers, directors, employees, volunteers, agents, representatives and insurers from any cause of action, claims, or demands of any nature whatsoever including, but in no way limited to , claims of negligence, which I, my heirs, representatives, executors, administrators and assigns may have, now or in the future, against University City on account of personal injury, property damage, death, or accident of any kind, arising out of or in any way related to the use of University City facilities/equipment or participation in programs/activities at University City whether that participation is supervised or unsupervised, however the injury or damaged occurs, including but not limited to the negligence of releases. THE UNDERSIGNED HEREBY ASSUMES ALL RESPONSIBILITY FOR AND RISK OF ILLNESS, BODILY INJURY, DEATH OR PROPERTY DAMAGE to the undersigned or such participating children due to negligence, active or passive, or otherwise while in, about or upon the premises of University City and/or while using the premises or any facilities or equipment thereon or participating in any programs/activities held at University City. The undersigned acknowledges that any illness or injuries that the undersigned or such participating children contract or sustain may be compounded by negligence first aid or emergency response of the releases and waive any claim in respect thereof.

In consideration of my participation in programs/activities held at University City, I, the undersigned participant agrees to INDEMINIFY AND HOLD HARMLESS releases from any and all cause of action, claims, demands, losses, or costs of any nature whatsoever arising out of or in any way related to my programs/activity's participation or access to facilities. I hereby certify that I have full knowledge of the nature and extent of the risks inherent in programs/activities, participation and facility use and that I am voluntarily assuming said risks. I understand that I will be solely responsible for any loss or damage, including personal injury, property damage, or death. I sustain while participating in programs/activities or facilities at University City and

that by signing this agreement, I HEREBY RELEASE releases from all liability for such loss, damage, or death. I further certify that I am in good health and that I have no conditions or impairments which would preclude my safe participation in programming or facility use at University City.

I HAVE CAREFULLY READ AND VOLUNTARILY SIGN THIS ASSUMPTION OF RISK, RELEASE AND WAIVER OF LIABILITY, ST. LOUIS COUNTY HEALTH DEPARTMENT GUIDELINES, AND INDEMNIFY AGREEMENT AND FURTHER AGREE THAT NO ORAL REPRESENTATIONS, STATEMENTS OR INDUCEMENT APART FROM THE FOREGOING WRITTEN AGREEMENT HAVE BEEN MADE. I AM AWARE THAT BY AGREEING TO THIS AGREEMENT I AM GIVING UP VALUABLE LEGAL RIGHTS, INCLUDING THE RIGHT TO RECOVER DAMAGES FROM UNIVERSITY CITY OF ILLNESS, DEATH OR PROPERTY DAMAGE, INCLUDING FOR THE AVOIDANCE OF DOUBT AND WITHOUT LIMITATION. EXPOSURE TO COVID-19 AT ANY UNIVERSITY CITY FACILITY OR PROGRAM AND ANY ILLNESS, INJURY OR DEATH RESULTING THEREFROM. I UNDERSTAND THAT THE DOCUMENT IS A PREMISE NOT TO SUE AND A RELEASE OF AND INDEMNIFICATION FOR ALL CLAIMS. IF SIGNING ON BEHALF OF MINOR: I UNDERSTAND THAT THIS AGREEMENT IS MADE ON BEHALF OF MY MINOR CHILDREN AND/OR LEGAL WARDS AND I REPRESENT AND WARRANT TO UNIVERSITY CITY THAT I HAVE FULL AUTHORITY TO SIGN THIS AGREEMENT ON BEHALF OF SUCH MINOR(S)

IN WITNESS WHEREOF, THIS INSTRUMENT IS DULY EXECUTED THIS _____ DAY OF _____ IN THE YEAR _____.

Signature _____ Print Name _____

Address _____ City _____ State _____ Zip _____

Telephone (____) _____ Date _____

**PARENT OR GUARDIAN ADDITIONAL AGREEMENT
(Must be completed for participants under the age of 18)**

In consideration of _____ (PRINT minor's names) being permitted to participate in this activity, I further agree to indemnify and hold harmless Releasees from any claims alleging negligence which are brought by or on behalf of minor or are in any way connected with such participation by minor.

Parent or Guardian _____ Print Name _____ Date _____

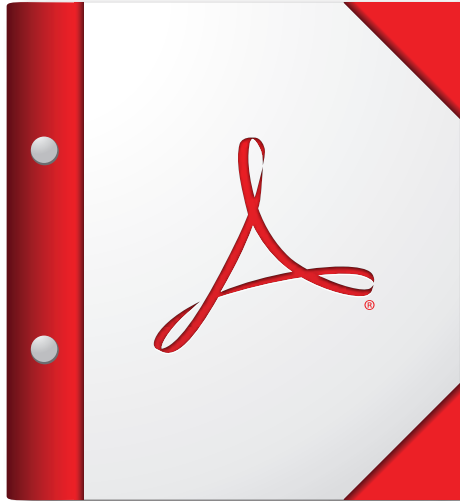
From: [Kevin T](#)
To: [Darren Dunkle](#); [Carl Hoagland](#)
Cc: [LaRette Reese](#); [Janet Carter](#)
Subject: March 2nd Parks Commission Meeting Citizen Comments
Date: Tuesday, March 2, 2021 8:50:31 AM
Attachments: [Waiver Requirements Citizens Comment.pdf](#)
[Insurance Requirements for Facilities Citizens Comment.pdf](#)

CAUTION: This email originated from outside your organization. Exercise caution when opening attachments or clicking links, especially from unknown senders.

Please provide the attached Citizen Comments to each of the Parks Commission members prior to the scheduled March 2, 2021, Parks Commission meeting.

Also, please include these comments as part of the official meeting minutes/records of the march 2, 2021 meeting.

Kevin Taylor kevintaylor_kt@yahoo.com 314.276.2790



**For the best experience, open this PDF portfolio in
Acrobat X or Adobe Reader X, or later.**

[Get Adobe Reader Now!](#)