

## **Release and Indemnity**

In consideration of Douglas Shire Council ("Council") issuing me/us with The Approval for the purpose described or allowed under The Approval ("the activity/activities"),

I/we: \_\_\_\_

- 1. release and discharge Council and Council's agents, servants, officers and insurers ("the Related Parties") from and in respect of all liability, claims, losses, damages or proceedings which I/we may have (either now or accruing in the future) against Council and/or the Related Parties in respect of, or arising out of, or in connection with the activity/activities;
- 2. agree that the release and discharge given under clause 1 may be pleaded by Council and the Related Parties as a bar to any action, suit or proceeding commenced now or taken at any time by Council and/or the Related Parties, against Council and/or the Related Parties, or to which Council and/or the Related Parties is or are joined as a party or parties, in respect of, or arising out of, or in connection with the activity/activities; and
- 3. agree that I/we am/are liable for and shall indemnify Council and the Related Parties against any liability, claim, loss, damage or proceeding in respect of, or arising out of, or in connection with the activity/activities.
- 4. The release and indemnity provided by you under 1-3 is, however, reduced to the extent that the Council and/or any of the Related Parties have caused or contributed to the relevant liability, claim, loss or damage.

The covenants given under this document are binding upon me/us and my/our heirs, executors, successors and permitted assigns.

**SIGNED** by: (signature of approval holder) (print name of approval holder) in the presence of: (print name of witness) (signature of witness) on this \_\_\_\_\_ day of \_\_\_\_\_ 20 If the Approval Holder in a Corporation: SIGNED for and on behalf of: (print name of corporation) by: (print name & position of representative person) (signature of representative person) by: (print name & position of representative person) (signature of representative person) in the presence of: (print name of witness) (signature of witness) on this day of 20 **OFFICE USE** Date of Approval: Are all sections of the form completed and signed? Approval No: Approval Holder::

## If the Approval Holder in an Individual: