Joint Base MDL Release and Indemnification

In consideration for permission to use the facilities of Joint Base McGuire-Dix-Lakehurst, New Jersey for U.S. Naval Sea Cadet Corps summer training evolutions, I hereby release and hold harmless Joint Base McGuire-Dix-Lakehurst, The United States Navy, the United States Air Force, and the United States Government and any of its employees from any liabilities and claims arising from my participation. I agree that I will never prosecute or in any way aid in the prosecuting of any demand, claim or suit against the United States Government, the U. S. Navy, the U.S. Air Force, Joint Base MDL, or any officer, agency or employee acting officially or otherwise, for any loss, damage or injury to my person or property that may occur from their negligence as a result of my taking part in the military exercise.

I also understand and agree that I may be held liable for any damage or loss to Joint Base McGuire-Dix-Lakehurst, or the United States Government, that is caused by my own conduct or actions, intentional or negligent, grossly negligent or willful, wanton or reckless, and any misconduct or fraud. I also understand and agree that I may be held liable for any damage or loss to any third party that is caused by my own negligence, gross negligence, willful misconduct or fraud.

I understand that U.S. Naval Sea Cadet Corps training evolutions are staffed by volunteer personnel and I agree to indemnify and hold harmless all those personnel staffing this training from all liability as mentioned in the foregoing paragraphs.

I understand that this and any event of this nature involves a level of risk. I accept full responsibility for the cost of treatment for any injury or illness. I further understand that U.S. Naval Sea Cadet Corps is fully insured and that any claims for any injuries must be made first against USNSCC Cadet personal or family insurance and subsequently U.S. Naval Sea Cadet Insurance.

Name of Participant _____
First Middle initial Last

Signature of Participant _____

If participant is a minor:

Name of Parent or guardian _____
(print clearly) First Middle initial Last

Signature of parent or guardian _____

Date: _____