

**DISCLAIMER AND WAIVER OF LIABILITY**

On Monday, April 8, 2024, a rare opportunity will be available to the City of Glendora's residents, the chance to view a partial solar eclipse during our daylight hours. At the Glendora Public Library located at 140 S Glendora Ave, Glendora, CA 91741, we are pleased and excited to be able to experience this wonderful event with our residents and will have a limited number of glasses for disbursement. As Always, safety is our top priority, therefore, the City of Glendora has obtained ISO 12312-2 certified eclipse safety glasses. The City has taken every reasonable effort to verify the authenticity of these safety glasses including checking with the American Astronomical Society for spotting counterfeit safety glasses. The use of even certified safety glasses is dependent upon the proper use of the glasses. You will be handed instructions on how to effectively use the safety glasses, read it thoroughly. Please be advised it is imperative to follow all directions and instructions in the use of the safety glasses, we also do not advise you to view the eclipse without proper safety glasses.

**FOR YOUR SAFETY YOU MUST USE THE SAFETY GLASSES AS INSTRUCTED.**

**THERE IS NO SAFE TIME TO VIEW THE ECLIPSE IN OUR AREA WITHOUT SAFETY GLASSES. FAILURE TO USE PROPER EYE PROTECTION MAY RESULT IN SERIOUS EYE INJURY AND DAMAGE TO THE VIEWER'S VISION.**

**YOU ARE IRREVOCABLY RELEASING AND INDEMNIFYING, THE CITY OF GLENDORA FROM ANY LIABILITY, LOSS, CLAIM AND EXPENSE (INCLUDING ATTORNEY'S FEES), INCLUDING BUT NOT LIMITED TO BODILY INJURY OR OTHER PERSONAL HARM, WHICH MAY RESULT FROM FAILURE TO USE OR THE IMPROPER USE OF THE ECLIPSE SAFETY GLASSES UNDER ANY CIRCUMSTANCES OR CONDITIONS. ALL RISKS ASSOCIATED WITH USING THE ECLIPSE SAFETY GLASSES AND VIEWING THE ECLIPSE REST SOLELY AND ENTIRELY WITH THE USER OR THEIR PARENT OR LEGAL GUARDIAN. BY SIGNING THIS RELEASE, YOU FULLY UNDERSTAND AND ASSUME THE RISKS IN USING THE ECLIPSE SAFETY GLASSES AND VIEWING THE ECLIPSE.**

**YOU CONFIRM THAT YOU HAVE READ THIS RELEASE OF LIABILITY AND FULLY UNDERSTAND ITS TERMS.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_

Parent or Guardian Signature: \_\_\_\_\_

Name of Parent or Guardian: \_\_\_\_\_