

WAIVER & RELEASE

1. I desire to participate voluntarily in gardening and other activities sponsored and coordinated by Community Garden of RCHD site. I understand that RCHD is granting me a revocable license to participate in this community garden, and such license may be revoked by RCHD at any time.

2. I am connected to ______organization and desire to voluntarily participate in programming at the Community Garden of RCHD. I understand that RCHD is not liable for any damages to my personal property.

3. I understand, accept, and assume the risks associated with participation in any and all activities at the garden site or involving RCHD, including, without limitation, any harm resulting from tools or structures located or used at the garden site, and the actions of other gardeners (including any negligent or wrongful actions).

4. I assume full responsibility for any injuries which may occur to me, as well as the safety of my family and guests, any damage or personal property, and do hereby fully and forever discharge and release the community garden site landowner and RCHD, its employees, board members, officers, agents, authorized volunteers, representatives, consultants, insurers and sureties, and their successors and assigns (collectively, the "Released Parties") from any "Claims." "Claims," as used in this document, mean any and all claims, demands, damages, rights of action or causes of action, present or future, whether the same be known, anticipated or unanticipated, resulting from or arising out of my presence or the presence of my family members and guests at the garden, activities at the garden, the use or intended use of the garden, and/or participation in activities connected with RCHD including, without limitation, any of the foregoing resulting from or arising out of the negligence of a Released Party. Further, I hereby waive any and all Claims against a Released Party.

5. I expressly acknowledge that participation in the community garden is for my purposes and convenience and not for the purpose and convenience of any one or more of the Released Parties.

6. I will permit the use of my name and picture in broadcasts, telecasts, newspaper, brochures, etc.

I represent and certify that my true age is either 18 years old or, if I am under 18 years old on this date, my parent or legal guardian has read and signed this form. I have read this entire Release, fully understand it, and I agree to be legally bound by it.

Participant's Signature	
Printed Name	Date
Parent/Guardian's Signature	
Printed Name	Date