

Disclaimer Form

(ORGANIZATION NAME) DISCLAIMER NOTICE AND RELEASE OF LIABILITY

I understand that during Clean ups of the (mention specific [area of cleanup](#)) in which I participate, certain risks and dangers may arise including but not limited to:

Physical Injury, traveling in remote areas, animals, forces of nature, accident and/or illness from water-borne pathogens.

It is my sole responsibility to wear the correct safety clothing and protection which I must provide for myself as [Organization's Name](#) does not automatically provide such protective clothing.

(My [Organization's Name](#)) does not undertake and does not have any responsibility for the accuracy of any information it provides or to determine or assure the suitability of any Clean Up or any other event or activity of [Organization Name](#), in general or as to a particular person. [Organization Name](#) has no duty to provide medical assistance or advice to any person or volunteer involved in the clean up. All persons who participate in any clean up or other activity as arranged by [Organization Name](#) accepts responsibility for making their own determinations as to the suitability of the activity and for their own safety, conduct and well-being and agrees to participate in the clean up solely at their own risk.

In consideration of the right to participate in any clean ups or other activities of [Organization Name](#), I, the undersigned, assume the risk associated with these activities and will hold [Organization Name](#), its officers, directors, leaders and agents harmless from and defend them against any and all liability, actions, suits, claims and demands which could arise from any of the organisation's activities and from any loss, harm or injury which I may sustain as a result of my participation in any of these activities. This agreement shall also serve as a release of liability and assumption of risk by me, and is intended to be binding on my heirs, administrators, executors and all members of my family. By my signature below I agree to all aspects of this disclaimer and agree to abide by any and all rules and regulations of [Organization Name](#).

SIGNATURE _____

PRINT NAME _____

ADDRESS _____

PHONE _____

CELL _____

E-MAIL ADDRESS _____

ONLY APPLICABLE IF YOU ARE CONDUCTING COVID SCREENING:

Temperature: _____

Contact with Covid Positive person: Y / N

Fever: Y / N

Cough: Y / N

Difficulty Breathing: Y / N