

GRAYROCK HOMEOWNERS ASSOCIATION

WAIVER AND RELEASE OF LIABILITY

In return for being allowed to participate in volunteer activities for and with the Grayrock Homeowner’s Association, including any activities incidental to such participation (“Volunteer Activities”), the undersigned Volunteer or Parent/Legal Guardian of Volunteer if Volunteer is under age 18 (hereafter referred to using “I”, “me”, or “my”) releases and agrees not to pursue the Grayrock Homeowner’s Association or its officers, directors, employees, sub contractors, sponsors, agents and affiliates (“the Association”) for any present and future claims that may be made by me, my family, estate, heirs, or assigns for property damage, personal injury, or wrongful death arising as a result of my participation in the Volunteer Activities.

I understand that participation in the Volunteer Activities involves certain risks, including, but not limited to, serious injury and death. I am voluntarily participating in the Volunteer Activities with knowledge of the danger involved and I agree to accept all risks of participation.

I also agree to indemnify and hold harmless the Association for all claims arising out of my participation in the Volunteer Activities. Any volunteer work will be performed with prior authorization of the Association.

I represent that, to my knowledge, I am in good health and suffer no physical impairment that would or should prevent my participation in the Volunteer Activities.

The Association does not have responsibility for providing any health, medical or disability insurance coverage for me. Volunteers are encouraged to have medical/health insurance. I represent that, to my knowledge, I am in good health and suffer no physical impairment that would or should prevent my participation in the Volunteer Activities.

I understand that if I drive my personal vehicle for Association business while volunteering, I must have a valid driver’s license and proof of auto insurance.

I understand that this document is intended to be as broad and inclusive as permitted by the laws of the Commonwealth of Virginia and agree that if any portion of this Agreement is found invalid, the remainder will continue in full legal force and effect.

I am of legal age and am freely signing this agreement. I have read this form and understand that by signing this form, I am giving up legal rights and remedies.

I am the parent or legal guardian of the Volunteer. I am of legal age and am freely signing this agreement. I have read this form and understand that by signing this form, I am giving up legal rights and remedies.

Printed Name of Volunteer

Printed Name of Parent or Legal Guardian (if Volunteer is under 18)

Signature of Volunteer or Parent/Legal Guardian

Date

Emergency Contact Name

Emergency Contact Phone Number