**Alice Ferguson Foundation Liability Waiver & Volunteer Sign-in Sheet**

**Washington Metropolitan Chapter Community Associations Institute**

Event Name: Potomac Watershed Cleanup

Date: April 10, 2021

***PLEASE READ THE WAIVER BELOW PRIOR TO SIGNING***

I acknowledge that I am voluntarily assisting in the Annual Potomac River Watershed Cleanup. I understand as a volunteer that I will not be paid for my services, that I will not be covered by any medical or other insurance coverage provided by coordinators of the Annual Potomac River Watershed Cleanup, and that I will not be eligi-ble for any Workers Compensation benefits. Now therefore, I hereby agree that I, and anyone else claiming through me, will not make a claim against Alice Ferguson Foundation, any of its affiliated and partner organizations, or either of their officers or directors collectively or individually, or the supplier of any materials or equip-ment that is used during the service project, or any of the volunteer workers, for the injury or death to me or damage to my property, however caused, arising from my participation. This release is intended to be broad in its effect.
I hereby agree to accept any and all risks of injury, illness or death in connection with my participation in volunteering. I have carefully read this assumption of risk and general liability release agreement, and I fully understand its contents. I am aware that this is a release of liability and a legal contract between me and Alice Ferguson Foundation and that it affects my legal rights. I am signing this document of my own free will. I further con-sent to the unrestricted use by Alice Ferguson Foundation and/or person(s) authorized by them of any photographs, recordings, interviews, videotapes, motion pic-tures, or similar visual recording of me and/or my children.

| Print Name | Signature | Zip Code | Email |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

**Alice Ferguson Foundation Liability Waiver & Volunteer Sign-in Sheet**

*By signing below, you acknowledge that you have read the waiver on page 1*

*Event Name: Potomac Watershed Cleanup*

*Date: April 10, 2021*

| Print Name | Signature | Zip Code | Email |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |