## Waiver of Liability and Hold Harmless Agreement Madison Area Food Pantry Gardens, Inc. for 2023

In consideration for being allowed to participate in Madison Area Food Pantry Gardens, Inc.(MAFPG) volunteer activities, and engage in volunteer activities, I freely and voluntarily, execute this Waiver under the terms below.

WAIVER AND RELEASE. I hereby release and discharge and hold harmless MAFPG, its officers and volunteer leaders from liability or claim against MAFPG with respect to any injuries, damages, or loss sustained while participating in MAFPG activities during this calendar year. I also understand that MAFPG does not assume any responsibility for or obligation to provide financial assistance or other assistance in the event of injury, illness, death, or property damage.

ASSUMPTION OF RISK. As a volunteer for MAFPG, I understand that I am working in a garden and farming environment and that certain hazards may be present, including, uneven terrain, irregular soil conditions, insects and pests, and changing weather conditions (including exposure to sun and/or heat). I acknowledge that I and other volunteers may be using unfamiliar equipment. I also acknowledge that I have a responsibility for my own protection and comfort.

INDEMNIFICATION. I further AGREE TO INDEMNIFY AND HOLD HARMLESS MAFPG from any loss, liability, damage or costs that MAFPG may incur due to my negligence while participating in said project.

MEDICAL TREATMENT. In the event of an emergency, I give permission to MAFPG to administer first aid and/or to secure necessary treatment by skilled medical personnel. Every effort will be made to contact the Emergency Contact person identified below.

PHOTOGRAPHIC RELEASE. I further grant to MAFPG, its designees and successors, my consent to use my name, photograph, likeness, image, voice, and biography in connection with my participation for MAFPG's use in any publications, advertising, publicity, internet pages or social media.

OTHER. This waiver is governed by and interpreted in accordance with the laws of the State of Wisconsin. I agree that in the event that any clause or provision of this Release is deemed invalid, the enforceability of the remaining provisions of this Release shall not be affected.

I, as a participant and signing below, have read The Waiver of Liability and Hold Harmless Agreement and fully understand that I assume responsibility as indicated. and Hold Harmless Agreement and fully understand that I assume responsibility as indicated.

| Signature:   | Date:   |
|--|---|
| Print Name:  |   |
| Volunteer Email:   | Phone:  |
| Anticipated date of service with MAFPG:  |   |
| Only check this box if you do not wish to allow your imag  | ge to be used publicly. Photographic Release Opt-out  |
| If the volunteer named above is under eighteen (18) yea<br>below providing my consent to the volunteer's participa | rs of age, I, the Guardian of the above-named volunteer, sign<br>tion subject to the above terms. |
| Parent/Guardian Signature:   | Date:   |
| Parent/Guardian Print Name:  |   |
| Parent/Guardian Email:   | Phone:  |
| Additional Volunteer Information   |   |
| Emergency Contact:   | Phone:  |
| Group Affiliation (e.g., School name, Church, Club, or Con   | npany):   |
| How did you learn about this volunteer opportunity?  |   |
| Please choose which e-newsletter(s) you wish to receive  | (if any): MAFPG (monthly) Forward Garden (weekly)   |