



Individual Waiver & Release

Affiliated Group Name (if applicable): _____

I, the undersigned Participant (if Participant is 18 years of age or older) or parent/guardian of the minor Participant listed below, acknowledge and fully understand that Participant will be participating in volunteer activities related to the Creative Reuse Marketplace (CRM) within Springfield. By signing below, I acknowledge and fully understand that Participant may engage in activities that involve risk of damage to personal property, illness, injury, including permanent disability or death, which might result not only from Participant's own actions, inactions or negligence, but the action, inaction or negligence of others, the condition of the premises, or of any equipment used, and further, that there may be unknown risks not reasonably foreseeable at this time.

In consideration for the CRM's permission to participate, Participant hereby releases, discharges, covenants to indemnify and not to sue the Creative Reuse Marketplace, its officials, employees, agents, volunteers, and co-sponsors, including the owner of the premises where the volunteer activities occur (collectively, the "Releasees"), from any and all liability of any nature from any cause whatsoever, including the acts or omissions of any of the Releasees. I, on behalf of Participant (or myself) and Participant's heirs and personal representatives, further agree to indemnify and hold harmless the Releasees, and each of them, from all liability, loss, claim, cost or expense, including attorney's fees, or any damage whatsoever, including death or damage to property, resulting from any claim, suit, demand, or action which may hereafter be made or instituted against any of the Releasees as a result of Participant's participation in the volunteer activities. I agree to assume all risks encountered in the course of the volunteer activities, and I am fully aware that personal risk of injury may be involved.

I have read the foregoing Waiver and Release and understand that (I) we have given up substantial rights by signing this release and sign below voluntarily.

NAME OF PARTICIPANT: _____
(Please print)

AUTHORIZING PARENT/GUARDIAN (if applicable): _____
(Please print)

DATED: _____, 20____

(Signature of Participant or
Authorizing Parent / Guardian)