

**WAIVER**

I wish to volunteer in this activity sponsored by the San Francisquito Watershed Council, a fiscally sponsored project of Acterra. I agree to conduct myself in a safe and responsible manner at all times. I will watch out for and warn others about any potentially unsafe situations. I represent that I am in good physical condition and know of no reason why it would be unsafe for me to participate in the activity. I understand that despite diligent efforts to conduct this activity in the safest possible manner the risk of injury persists. I understand that I must rely on my own medical insurance in the event that I am injured during this activity. I agree to release Acterra from any liability for any such injury. I agree that Acterra, its officers, employees and members shall not be liable for any injuries or damage to me including but not limited to injury or damage resulting from active or passive negligence on their part.

**PHOTO RELEASE (optional)**

I, \_\_\_\_\_ (your name) hereby authorize the San Francisquito Watershed Council to use my name and picture for non-commercial outreach purposes including but not limited to the website, brochures, and flyers. I hereby waive the right to any and all payment or compensation for the use of my picture.

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**FOR PARTICIPANTS UNDER 18, THE PARENT OR GUARDIAN MUST SIGN.**  
*I am the legal parent or guardian of the above participant. I have read and agree to the provisions stated above.*

\_\_\_\_\_  
Parent / guardian's name                      Date                      \_\_\_\_\_  
Email address

\_\_\_\_\_  
Parent / guardian's signature