

FRIENDS OF L'ARCHE ATLANTA, INC. ("L'Arche Atlanta")

RELEASE & LIABILITY WAIVER – RELEASE FOR AN ADULT

Please read carefully. This is a legal document that affects your legal rights.

This Release and Waiver of Liability (the "Release") executed on (date) _____ by
(printed name of participant) _____ (the "Participant") releases
Friends of L'Arche Atlanta ("L'Arche Atlanta"), a nonprofit corporation organized and existing under the laws of the State
of Georgia, and each of its directors, officers, employees, and agents. Participant desires to engage in activities related to
L'Arche community programs.

Participant expresses their understanding and intent to enter into this Release and Waiver of Liability willingly and
voluntarily under the following terms:

1. I acknowledge that my participation in L'Arche activities and events may involve risk of injury, including economic losses, which may result from my own actions, inactions, or negligence; from the actions, inactions, or negligence of others; from the conditions of the facility or location where the event occurs; or from the equipment or areas where the event is being conducted.
2. I release, waive, discharge, and relinquish L'Arche Atlanta, its officers, employees, successors, assigns, legal representatives, agents, or the organizers, sponsors and supervisors of L'Arche Atlanta events, from any and all liability, claims, causes of action, loss, damage, demands, in law or in equity, of whatever kind or nature, arising out of or related to my program participation with L'Arche Atlanta.
3. I assume all risks of bodily injury, give permission to be taken to a hospital and/or treated by licensed medical staff for medical emergencies of illness and/or injuries, understand that L'Arche Atlanta does not assume any responsibility for or obligation to provide me with financial or other assistance, including but not limited to medical, health, or disability benefits or insurance, and I expressly waive any such claim for compensation or liability on the part of L'Arche Atlanta beyond what may be offered freely by L'Arche Atlanta in the event of injury or medical expenses incurred by me.
4. **I agree that photographs, videos, audio recordings, slides, or movies of me may be taken while I am participating in programs associated with L'Arche Atlanta. I consent to the use of photographs, videos, audio recordings, slides, or movies for any legal purpose.** I hereby grant and convey unto L'Arche Atlanta all right, title, and interest in any and all photographic images and video or audio recordings made during program activities on behalf of L'Arche Atlanta, including but not limited to, any royalties, proceeds, or other benefits derived from the use of such photographs or recordings.
5. I understand that the scope of my relationship with L'Arche Atlanta is limited to a participant position and agree that my participation offers no remuneration, nor will I accept any remuneration, directly or indirectly, for any services authorized by L'Arche Atlanta, and performed on behalf of L'Arche Atlanta.
6. I understand and agree that this waiver is intended to be as broad and inclusive as permitted by the laws of the State of Georgia, and that this waiver shall be governed and interpreted in accordance with the laws of the State of Georgia. I agree that in the event that any clause shall be deemed invalid by any court of competent jurisdiction, the invalidity of such clause shall not otherwise affect the remaining provisions of this waiver, which shall continue to be enforceable.

PARTICIPANT SIGNATURE _____ Date: _____

EMERGENCY CONTACT

Name _____

Relationship to Person _____

Phone Number _____