



RELEASE FROM LIABILITY

_____ Chapter of National AMBUCS™, Inc.

Please read and sign the release below

For the opportunity to participate in the services offered through the AMBUCS™ ramp program, I do hereby agree that:

1. I understand and acknowledge that the activity may involve risks and dangers, including bodily injury and property damage which may result from, in whole or part, my own acts or omissions, the acts or omissions of other participants or due to conditions in which the activity takes place. I fully and knowingly assume all such risks and responsibility for any loss cost of damage I incur as a result of my participation in ramp building services provided by AMBUCS™;
2. I release, indemnify, discharge and forever hold harmless National AMBUCS™, Inc., any and all causes of action, liabilities, charges and costs whatsoever, whether in statutory or common law, which may result from or be contributed to by my participation in ramp building services provided by AMBUCS™;
3. If any provision of this waiver, release and assumption of risk is found to be unenforceable, it shall not effect the enforceability of the remaining portions, which shall be enforced to the extent permitted by law,
4. This agreement shall bind my heirs, executors, administrators, successors and assigns; and
5. I also grant (chapter name) to:

_____ take and use photographs of myself
initials

_____ take and use photographs of my home
initials

_____ use my name in media releases and AMBUCS™ publications
initials

_____ use my city and state of residence in media releases and AMBUCS™ publications.
initials

I have carefully read this agreement and fully understand its terms and have signed it freely, intending it to be a complete and unconditional release of any and all liability.

Signature of Applicant

Date

Printed name

Address

City

State

Zip Code

Phone number

After completion, please upload to the caprockambucs.com website by clicking on the “+Upload Wheelchair Ramp Waiver” button on the ramp page.