

# Community Association Event Liability Waiver Form

This document affects your legal rights. Please read it carefully before signing. This form is to be completed by all participants in events organized or hosted by the Community Association.

## 1. Participant Information

Participant Full Name:

Street Address:

City, State, Zip:

Phone Number:

Email Address:

## 2. Emergency Contact Information

Emergency Contact Name:

Relationship to Participant:

Emergency Contact Phone:

## 3. Event Details

Name of Community Event:

Date of Event:

## 4. Liability Waiver and Release

By signing below, I acknowledge and agree to the following terms:

- Assumption of Risk:** I understand that participation in the community association event involves certain inherent risks, including but not limited to physical injury, illness, property damage, or death. I voluntarily assume all risks associated with my participation.
- Release and Hold Harmless:** I hereby release, waive, discharge, and covenant not to sue the Community Association, its board of directors, officers, employees, volunteers, and agents from any and all liability, claims, demands, or causes of action arising out of or related to any loss, damage, or injury that may be sustained by me while participating in the event.
- Medical Treatment:** In the event of an emergency, I authorize the Community Association to secure necessary medical treatment for me, and I agree to be solely responsible for all costs associated with such treatment.
- Rules and Regulations:** I agree to abide by all rules, guidelines, and safety instructions provided by the Community Association during the event.

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## 5. Acknowledgment and Signature

I have read this Liability Waiver and Release Form, fully understand its terms, and understand that I am giving up substantial rights by signing it.

Print Participant Name:

Signature of Participant (or Parent/Guardian if under 18):

Date Signed: