## Broombusters Invasive Plants Society

## WAIVER AGREEMENT

Please read this carefully before signing. When sign Invasive Plant Society and related parties from all leg or loss that may occur in connection with your partic	gal responsibility for any injury, damage
I, the undersigned (please print legibly)  Broombusters Invasive Planet Society (Broombusters Mapping, cutting, stacking, and removing Scotch broombusters)	s) is a volunteer organization whose purpose is:
I further understand and acknowledge that my particirisk. I understand that participation with Broombuste by the undersigned. The risks include, but are not lim tripping and falling; injuries from branches, thorns, b hazards of natural plant and animal life, ticks, and oth risks associated with my participation include the risk property damage and I voluntarily assume these risks	rs involves certain risks, all of which are assumed ited to, traffic hazards, injuries from tools, roken glass, needles; wildlife encounters, health her environmental factors. I acknowledge that the as of physical injury, illness, loss of life and
I also understand and acknowledge that my risk in pastate of fitness and my physical, mental and emotional possess and use. I understand and acknowledge that the are neither trained nor expert in any form of medical	al health, as well as the awareness and care that I he officers, organizers and fellow Broombusters
I hereby release Broombusters, its officers, members, responsibility or liability for any losses, prejudice, in participating, or arising out of or connected with my caused by negligent act or omission of any of the about acting on their behalf. To that effect, I hereby express of action, (and those of my representative in the even Broombusters, its officers, members, organizers or voinjury or death.	jury or loss of life that may occur while I am participation with Broombusters, including those we mentioned individuals or entities, or others ly waive all my rights, recourse, claims or causes t of my death), that I may have against
For myself, my heirs, executors, administrators, or are to sue, and waive, release and discharge, to the full exsocieties, organizations, governments, ministries, land or employees or agents, or anyone acting on their behinjury, death, damage to property or loss of any kind whether arising by reason of negligence of anyone—behalf, or otherwise.	Attent permissible by law all those individuals, d owners and provinces, and any of their members half, for any and all claims or liability for personal whatever nature or kind or however cause,
I acknowledge that I have read this agreement, un	derstand it, and signed it:
Date: day of, 20 Email ac	ldress:
Printed name of Participant	Signature of Participant