



Community Garden Liability Waiver

Participant's Full Name: _____

Date of Birth: _____ Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

I, the undersigned, acknowledge that I am voluntarily participating in activities associated with the Pilgrim Terrace Community Garden, located at 649 Pilgrim Terrace Drive, Santa Barbara, CA 93101. I understand that participating in gardening activities carries inherent risks, and I agree to assume all such risks, including but not limited to the risks of personal injury, property damage, and exposure to environmental conditions.

Assumption of Risk: I acknowledge that gardening activities may include, but are not limited to, digging, planting, weeding, using gardening tools and equipment, and exposure to various plants, insects, and environmental factors. I understand that accidents and injuries can occur despite best practices and safety precautions.

Release and Waiver of Liability: In consideration for being permitted to participate in community garden activities, I hereby release, waive, discharge, and covenant not to sue Pilgrim Terrace Cooperative Homes Nonprofit, its officers, directors, members, volunteers, and agents (hereinafter referred to as "the Releasees") from any and all liability, claims, demands, actions, or causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me or any property belonging to me while participating in gardening activities, whether caused by the negligence of the Releasees or otherwise.

Indemnification: I agree to indemnify and hold harmless the Releasees from any loss, liability, damage, or cost they may incur arising out of or related to my participation in community garden activities.

Photographic Release: I grant Pilgrim Terrace Cooperative Homes Nonprofit permission to use any photographs, videos, or other media taken of me during community garden activities for promotional and informational purposes without compensation.

I HAVE READ THIS LIABILITY WAIVER AND RELEASE AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL



RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Participant's Signature: _____ Date: _____

Parent/Guardian Signature (if participant is under 18 years old): _____

Printed Name: _____

Date: _____

Please retain a copy of this signed liability waiver for your records. If the participant is under 18 years old, a parent or legal guardian must sign on their behalf.