## Gleaner's Liability Waiver for 2021-2022 Gleaning Season

Please complete and bring to the field with you each time you glean.

**REQUIRED**: In the event I or my child suffer any illness or accident requiring emergency or hospitalization, medication or surgery while participating in this gleaning, on the recommendation of the doctor, after consultation with the adults in charge of this event, I hereby give my permission for any medical treatment which may deem necessary and reasonable under the circumstances, understanding that the gleaning coordinator or other responsible person will contact me at the earliest possible moment. I fully understand and comprehend that reasonable care will be exercised by the adult staff for this gleaning event to protect the safety of those involved.

Photos, videos, audio and other images in which I appear that are taken during gleanings may be used by CROS Ministries for news coverage, newsletters, publicity, reports, displays, and for other print, broadcast, web or electronic news or promotional purposes.

Safety is of paramount importance in a gleaning event. For the protection of all involved, this disclaimer is necessary: *I do not hold* the board members or employees of CROS Ministries, Palm Beach County Food Bank, or any volunteers liable for any injury, bodily harm, accident or death of myself/my child during gleaning events sponsored by CROS Ministries. Neither will I hold the person(s) who own and/or operate the farm(s), business, plant, orchards, groves or the homeowner who owns the backyard, from which we glean, liable for accidents, injury, or death during the gleaning events.

For events at Agri-Gators, Inc. the following also applies: Safety is of paramount importance in a gleaning event. For the protection of all involved, this disclaimer is necessary: I do not hold the person(s) who own and/or operate the farm(s), or employees of Agri-Gators, or any volunteers liable for any injury, bodily harm, accident or death of myself/my child during gleaning events.

Name	Print	Age	If Gleaner is under 18 or 18+ and still in F Parent must sign below	Iigh School	
Signature	Gleaner	Date	Signature Parent/guardian if gleaner is under 18 years of age	Date	
Group			Supervising Adult		
		Notify in Cas	e of Emergency		
Name		Relationship			
Cell Phone ()		Alternate P	Phone # ()		
<b>Medical Con</b>	ditions or D	rug Allergies:			
	Co	mmunity Ser	vice Hours Section		
I would like c	ommunity servic	e hours for this eve	ent. You must provide an email address below.		
E-mail address					

## Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19 – Adult and Minor SERIOUS RISK - PLEASE READ CAREFULLY

The coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

CROS has put in place reasonable preventative measures to reduce the spread of COVID-19; however, CROS cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, presence at CROS program sites could increase your risk and your child(ren)'s risk of contracting COVID-19. Persons in vulnerable populations (in the state of Florida this has been defined as persons over the age of 65 or those with underlying medical conditions) are encouraged to stay home. This guidance is consistent with the guidance from the federal and state government and the CDC.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at CROS program sites may result from the actions, omissions, or negligence of myself and others, including, but not limited to, CROS employees, volunteers, and program participants and their families.

On behalf of myself, my family members and my child(ren), I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s or my presence at CROS program sites or participation in CROS programs or CROS events due to COVID-19 ("Claims"). On my behalf, and on behalf of my children, I hereby release, waive, covenant not to sue, discharge, and hold harmless CROS, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of CROS, its employees, agents, vendors or contractors and representatives, whether a COVID-19 infection occurs before, during, or after participation in any CROS program.

Signature of Parent/Guardian	Date	
Print Name of Parent/Guardian	Name(s) of Participant(s)	
Name(s) of Participant(s)	Name(s) of Participant(s)	