

## Release and Waiver of Liability

### ***Known to All Men By These Presents:***

In consideration of receiving assistance from Wheat Ridge 2020, Inc. (WR 2020), Grantor.

I, \_\_\_\_\_ the Grantee, and undersigned, agree to the terms associated with the following program, defined as Dumpster Day, as follows:

1. The Grantee agrees to allow WR 2020, it assigns, employees, agents, and volunteers, to enter and/or utilize the premises of the undersigned for the purpose of placing a 30 cubic yard waste disposal dumpster for the purpose of facilitating a neighborhood clean up program, for the purpose of removing yard debris, furniture, general trash, and small appliances.
2. The Grantee agrees to provide notice to their neighbors and encourage their participation in this program, and provide the names, addresses, and telephone numbers of the participating neighbors as part of this application, with a minimum of five (5) participants.
3. The Grantee agrees and understands that the collection of refrigerators, freezers sod, dirt, bricks, cement, stones or HAZARDOUS MATERIALS (flammable liquids, chemicals and paint), is PROHIBITED under the terms of the program.
4. The Grantee agrees to provide a report to WR 2020 of the success of the program.
5. The Grantee further agrees tot the Release of Liability as expressed below:

I, \_\_\_\_\_, Grantee of the above referenced services, hereby release and hold harmless the Grantor, WR 2020, their employees, officers and agents and contractors from all liability, claims, demands, actions, and causes of actions whatsoever, arising out of or relating to any loss, damage or injury, including death, that may be sustained by me, or any property of me, in association with the program, as listed above, or engaged in the activity listed above.

I hereby acknowledge that I am aware of the purpose of the program and I assume all risks associated with the program. I hereby elect voluntarily to assume all risk of loss, damage, or injury, including death, that may be sustained by me or any property of mine while participating in the program. This Release shall be binding upon my distributees, heirs, next of kin, successors, executors, and administrators.

In signing the foregoing Release, I hereby acknowledge and represent:

- a. That I have read this Release, understand it, and sign it voluntarily;
- b. That I am over 18 years of age and of sound mind;
- c. That I am not an agent, servant, or employee of Wheat Ridge 2020, Inc..

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Signature

\_\_\_\_\_  
City, State, Zip

Phone: \_\_\_\_\_

Date: \_\_\_\_\_