



2024 LIABILITY & MEDICAL WAIVER FOR DAY TRIPS

Sebastopol Area Senior Center • 167 N High Street • 707-829-2440 • sebastopolseniorcenter.org

Your Information

Today's Date:
First/Last Name:
Email:
Physical Address:
City, ST & Zip:
Date of Birth:
Mailing Address (if different from above):

Your Emergency Information (required):

Emergency Contact (First/Last Name):
Emergency Contact Phone:
Relation to you:
Any Special Needs: (please note our trip escorts are not able to provide one-on-one service):
List medications you are currently taking (important if we need to call an ambulance):

WAIVER ACKNOWLEDGMENT AND RELEASE

- Liability Release:** In consideration of participation to all activities, I agree to indemnify and hold the Sebastopol Area Senior Center (SASC) harmless and release SASC and the City of Sebastopol, its officers, employees, and agents from any and all liability for any injury arising out of the activity/activities. I understand and accept that SASC does not provide medical insurance.
- Assumption of Risk** I acknowledge and understand the following: Participation includes possible exposure to and illness from infectious diseases including but not limited to COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist.

I knowingly and freely assume all such risks related to illness and infectious diseases, such as COVID 19, even if arising from the negligence or fault of the Released Parties; and I hereby knowingly assume the risk of injury, harm and loss associated with the Activity, including any injury, harm and loss caused by the negligence, fault or conduct of any kind on the part of the Released Parties.



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I acknowledge the health risks associated with any or all Activity/Activities, including but not limited to transient dizziness, lightheaded, fainting, nausea, muscle cramping, musculoskeletal injury, joint pains, sprains and strains, heart attack, stroke, COVID or sudden death. I agree that if I experience any of these or any other symptoms during the Activity, I will discontinue my participation immediately and seek appropriate medical attention.

3. Code of Conduct: All participants agree not to:

- Wear soiled clothing or have an unpleasant body odor including heavy perfume, alcohol, marijuana, or cigarette smoke.
- Shirt and shoes required at all times while at the Senior Center - Deface or destroy any Senior Center property.
- Leave or store personal possessions at the center. (*The SASC is not responsible for lost or stolen property and reserves the right to dispose of abandoned items*).
- Verbally attack, behave disrespectfully including loud, disruptive, obscene, hateful, or abusive language to another individual including instructors, volunteers, and staff.
- Use racial, religious, or sexual harassment of participants, volunteers, or staff
- Act in a disruptive or menacing or physically threatening manner.
- Remove Senior Center property without permission
- Appear at the Senior Center at any time in an intoxicated or chemically induced condition.
- Partake in smoking, vaping or chewing tobacco products during an activity as a participant, spectator, volunteer or instructor/person of authority if they are participating in a center event on or off site.
- Use the Sebastopol Area Senior Center for the purpose of conducting a commercial business without a contract or memorandum of understanding with the Sebastopol Area Senior Center.
- Knowingly allow a non-registered person to actively participate in an activity.

VIOLATIONS AND DISCIPLINARY PROCESS:

Flagrant violations of the above may result in immediate expulsion from the class/program/facility and the participant may not be issued a refund. Should the participant/spectator fail to comply, staff shall call the Sebastopol Police Department for assistance.

Repeated violations will result in an extended suspension and/or expulsion from the Senior Center.

4. **Media Release (optional):** The Sebastopol Area Senior Center (SASC) and the City of Sebastopol have my permission to make and use film, video, audio recordings, slides, and photographs of me. I understand that this permission includes re-use and re-publishing. I give my permission for this use to include marketing, promotional, and informational purposes. I release SASC and the City of Sebastopol, its officers, employees, and agents from any and all liability for any injury arising out of this use, including any and all claims for libel and invasion of privacy. I have read this media release and fully understand that I assume all risk for any injuries received by me.

_____ **Yes, I agree to the media release**

_____ **No, I do not agree to the media release**

Signature_____

Print Name_____