

2022 Cal-PBR Training Liability Waiver

By my signatures below, I, the undersigned, hereby acknowledge that I received the Participant Waiver Form, and hereby agree to the terms thereof.

The undersigned voluntarily agrees to participate in the Cal-PBR Network training at Yellow Creek beginning on September 29, 2022, through October 1, 2022, with knowledge of the hazards and potential dangers involved, and will exercise reasonable care to avoid illness or injury.

The undersigned recognizes that while participating in any fieldwork activities or trainings at Yellow Creek. Cal-PBR Network and the Landowners, and their officers, employees, agents and contractors, cannot guarantee that its participants, campers, volunteers, partners, or others in attendance will not become infected with COVID-19.

The undersigned recognizes that Cal-PBR Network and the Landowners have not undertaken any duty or responsibility for all risk of bodily injury, illness, death, disability, and property damage as a result of participating in this project.

The undersigned recognizes that these risks include general risks associated with transportation to and from the field, inherent hazards found in working in the field and around water bodies, and walking and hiking around the Sierra Nevada.

By my signature, I hereby state that I understand the risks involved in participation in Cal-PBR Network's training at Yellow Creek and willingly and voluntarily accept these risks. By my signature, I hereby surrender the right to seek reimbursement from Cal-PBR Network or from the Landowners and their directors, officers, employees, volunteers, and other agents for injury sustained and liability incurred during my participation in this activity. By my signature, I warrant that I am not relying on any oral presentations, statements, or inducement apart from the statements made on this form.

By my signature, I HEREBY RELEASE AND DISCHARGE Cal-PBR NETWORK AND THE LANDOWNERS AND THEIR OFFICERS, EMPLOYEES, AGENTS, AND CONTRACTORS FROM ALL ACTIONS, CLAIMS, OR DEMANDS THAT I, MY HEIRS, GUARDIANS, AND LEGAL REPRESENTATIVES NOW HAVE, OR MAY HAVE IN THE FUTURE, FOR INJURY, ILLNESS OR DAMAGE RESULTING FROM MY PARTICIPATION IN Cal-PBR NETWORK'S FIELDWORK AT YELLOW CREEK.

I UNDERSTAND THAT IF I AM INJURED IN THE COURSE OF THE PROJECT, I AM NOT COVERED BY Cal-PBR NETWORK'S WORKERS' COMPENSATION PROGRAM. I authorize Cal-PBR Network to seek emergency medical treatment on my behalf in case of injury, accident, or illness to me arising from my involvement as a participant. I understand that I will be responsible for medical costs incurred by such accident, illness or injury.

By signing below, I hereby state that I have carefully read this agreement, fully understand its contents and consent to the terms of this waiver agreement. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY, AND SIGN IT OF MY OWN FREE WILL.

Printed Name _____

Signature _____

Date _____