



AHWATUKEE COMMUNITY
SWIM & TENNIS CENTER

17th Annual Haunted House and Hayride

Volunteer Waiver

I understand that participation as a volunteer in the Haunted House and Hayride activities can involve certain risks, including, but not limited to, serious injury and death. I am voluntarily participating with knowledge of possible dangers involved and I hereby assume all risks of participation.

By signing this document, I hereby release the Ahwatukee Board of Management and waive all claims against the Ahwatukee Board of Management for damages that I may incur as a volunteer in the 17th Annual Haunted House and Hayride.

I also acknowledge the Ahwatukee Board of Management have not arranged and do not carry any insurance of any kind for my benefit, my parents, guardians, trustees, heirs, executors, administrators, successors, and assigns. I represent that, to my knowledge, I am in good health and suffer no physical impairment that would or should prevent my participation in volunteer activities.

In further consideration for my (or, if volunteer is under age 18, my child or ward) participation in the activities, I agree that Ahwatukee Board of Management and its assignees and licensees may use and publish my (or his or her) name, likeness or image in any medium or media or commercial reproduction for the purpose of promoting and marketing the activities. I waive any right I may have to inspect or approve any such use of publication.

I HAVE CAREFULLY READ THIS RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN ME AND THE AHWATUKEE BOARD OF MANAGEMENT AND WILL SIGN IT OF MY OWN FREE WILL.

Volunteer Signature (if 18 or older): _____ Date: _____

Parent or Legal Guardian's Signature: _____ Date: _____