**Waiver of Liability and Hold Harmless Agreement**

In consideration for participating in the Homeless Outreach Project (the “Activity”) and other valuable consideration, I hereby RELEASE, WAIVE, DISCHARGE AND CONVENANT NOT TO SUE the REALTORS® Association of York and Adams Counties, and Bell Socialization Services, Inc., and their respective officers, agents, employees, and volunteers (hereinafter referred to collectively as the “Parties”) from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or to any property belonging to me, WHETHER CAUSED BY THE NEGLIGENCE OF THE PARTIES, or otherwise, while participating in such Activity, or while in, on or upon the premises where the Activity is being conducted.

This Release and Hold Harmless Agreement shall bind the members of my family and spouse (if any) and my heirs, assigns, and personal representative, shall be deemed as a RELEASE, WAIVER, DISCHARGE AND COVENANT NOT TO SUE the above named Parties. I hereby further agree that this Waiver of Liability and Hold Harmless Agreement shall be construed in accordance with the laws of the Commonwealth of Pennsylvania. I agree that the courts having jurisdiction in York County, Pennsylvania, shall be the appropriate venue for any dispute involving this Waiver of Liability and Hold Harmless Agreement.

I ALSO UNDERSTAND THAT THE PARTIES ARE NOT RESPONSIBLE FOR SUPERVISION OF PARTICIPANTS OR THE ACTIONS OF ANY THIRD PARTY.

IN SIGNING THIS RELEASE, I ACKNOWLEDGE AND REPRESENT THAT I have read the foregoing Waiver of Liability and Hold Harmless Agreement, and that I understand it and sign it voluntarily as my own free act and deed. No oral representations, statements, or inducements, apart from the foregoing written agreement, have been made. I am at least eighteen (18) years of age and fully competent. I execute this Release for full, adequate and complete consideration fully intending to be bound by same.

IN WITNESS WHEREOF, I have hereunto set my hand on this \_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 201\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Signature if under 18 years old