



Free Bikes 4 Kidz MN VOLUNTEER WAIVER

In consideration of my desire to serve as a volunteer for Free Bikes 4 Kidz MN I hereby assume all responsibility for any and all risk of property damage or bodily injury that I may sustain while participating in any voluntary event or other activity of any nature.

Further, I, for myself and my heirs and assigns, hereby release and discharge Free Bikes 4 Kidz MN and its officers, directors, employees and volunteers of and from any and all claims which I may have against any of the above arising in connection with such volunteer efforts or my participation therein, and hereby waive all such claims, demands and causes of action.

Further, I expressly agree that this release, waiver and indemnity agreement is intended to be as broad and inclusive as permitted by the State of Minnesota, and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Also, I hereby grant permission to Free Bikes 4 Kidz MN to use my likeness, whether through the use of photographs, film, videotape, or other media, for promotional and marketing purposes.

I currently have no known mental or physical condition that would impair my capability for full participation as intended or expected of me.

Further, I have carefully read the foregoing release and indemnification and understand the contents thereof and sign this release as my own, free act. If I am a minor, my parent has read this waiver and signed below.

Covid-19 Considerations

I attest that:

1. I am not experiencing any symptom of illness such as cough, shortness of breath or difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell.
2. I have not traveled internationally within the last 14 days.
3. I have not traveled to a highly impacted area within the United States of America in the last 14 days.
4. I do not believe I have been exposed to someone with a suspected and/or confirmed case of the Coronavirus/COVID-19.
5. I have not been diagnosed with Coronavirus/Covid-19 and not yet cleared as non-contagious by state or local public health authorities.
6. I am following all CDC recommended guidelines as much as possible and limiting my exposure to the Coronavirus/COVID-19.

Participant name

Participant signature (or signature of parent
or guardian of a minor)

Date

Email Address

Phone Number