Community Woodshop SLC, LLC.

Release and Waiver of Liability

This release and Waiver of Liability (the "Release") executed on this 28th day of July, 2021, by Community Woodshop SLC, LLC and its directors, officers, employees, and agents (collectively, "CWSSLC"), organized and existing under the laws of the State of Utah, USA.

I, the member desire to participate in CWSSLC activities as a member of CWSSLC. I understand that the activities may include but are not limited to meetings, construction of personal, group and / or community projects, on-site and off-site and other participatory related activities.

**1. Waiver and Release:** I, the member release and forever discharge and hold harmless CWSSLC and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from my participation with CWSSLC.

I understand and acknowledge that this Release discharges CWSSLC from any liability or claim that I, the member may have against CWSSLC with respect to any bodily injury, personal injury, illness, death, or property damage that may result from my participation with any CWSSLC activities. I also understand that CWSSLC does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance, in the event of injury, illness, death, or property damage (see insurance requirements below.)

**2. Insurance:** I, the member, understand that CWSSLC does not carry or maintain, and expressly disclaims responsibility for providing any health, medical, or disability insurance coverage for the member. EACH MEMBER IS EXPECTED AND ENCOURAGED TO ARRIVE WITH MEDICAL OR HEALTH INSURANCE COVERAGE IN EFFECT.

**3. Medical Treatment:** Except as otherwise agreed to by CWSSLC in writing, I hereby release and forever discharge CWSSLC from any claim whatsoever that arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during my time as a member of CWSSLC or for CWSSLC.

**4. Assumption of the Risk:** I understand that my time as a member of CWSSLC may include activities that may be hazardous to me, including, but not limited to, construction activities, loading and unloading of heavy equipment and materials and the use of manual and powered high-speed wood cutting tools and machines. So, I recognize and understand that my time with CWSSLC may, in some situations, involve inherently dangerous activities. I hereby expressly and specifically assume the risk of injury or harm in these activities and release CWSSLC from all liability for injury, illness, death, or property damage resulting from the activities of my time with CWSSLC or for CWSSLC.

**5. Photographic Release:** I grant and convey unto CWSSLC all rights, title, and interest in any and all photographic images and video or audio recordings made by CWSSLC during my activities with CWSSLC, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

**6. Other.** I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Utah, and that this Release shall be governed by and interpreted in accordance with the laws of this State. I agree that in the event that any clause or provision of the Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of the Release, which shall continue to be enforceable.

To express my understanding of this Release and Waiver of Liability, I sign here below:

Name: (print)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CWSSLC Release of Liability Form 7-20-21