



Kalihiwai Community Garden
ACTIVITY FORM AND WAIVER OF LIABILITY

Last Name _____ First Name _____ Plot# _____

Address _____ City _____ Zip _____

Phone _____ E-mail _____

Will anyone else be working in your garden plot? YES NO

If yes, please indicate those individual(s): _____

Please Read and Sign Below

It is understood that I, the plot holder applicant, cannot participate in garden activities until this waiver form has been completed.

I, the undersigned, hereby elect to participate in this community garden knowing that the associated physical activity may be hazardous to my health and my property. I voluntarily assume full responsibility for any risks or loss, property damage, or personal injury, including death that may be sustained by me or my guests, or loss or damage to property owned by me, as a result of participation.

I understand that neither the garden group (members and guests), Malama Kauai, garden manager, nor land owners are responsible for my or my guests' actions. The undersigned hereby voluntarily forever releases, discharges, waives and relinquishes any and all actions or causes of action for personal injury, property damage, or wrongful death, occurring to the undersigned out of the participation in this garden or any activities thereto; wherever, or however the same may occur and whatever period said activities may continue, and the undersigned does hereby release, waive and discharge and relinquish any action or cause of action, aforesaid, which may hereafter arise for his/hers heirs, executors, administrators or assigns shall not prosecute or present any claim for personal injury, property damage or wrongful death against Malama Kauai, the land owner, garden manager and/or garden group members, guests, officers, agents, or contractually-obligated employees (hereinafter referred to as "releases") for any of said causes of action including, but not limited to, losses caused by passive or active negligence of the releases.

In signing this release, I acknowledge and represent that I have read the foregoing Waiver of Liability agreement, understand it and sign it voluntarily as my own free act and deed; no oral representations, statements or inducements, apart from the foregoing agreement have been made; and I further acknowledge that my participation in the Kilauea Community Garden will be in jeopardy should I fail to adhere to the garden rules.

Signature

Date

Forms may be returned to: **Malama Kauai, POBox 1414, Kilauea, HI 96754**