

2021 Danielle Downey Credit Union Classic Volunteer Disclosure, Waiver and Release Statement

It is most important that you read the following before signing.

I understand that:

- In the course of volunteering for the Danielle Downey Credit Union Classic (Tournament), I may be dealing with confidential information and I agree to keep such information in the strictest confidence.
- The relationship between the Tournament and volunteers may be discontinued at any time by either the volunteer or the "Tournament."
- I understand and acknowledge that I am strictly a volunteer, not an employee of the Tournament; that I volunteer my services freely and without pressure or coercion, direct or implied, from the Tournament; and, that there has been no promise of nor do I have an expectation of receiving compensation for the volunteer labor I may provide.
- I grant the FGTA, LPGA, and the Tournament the unrestricted and assignable right throughout the universe in perpetuity to use my likeness, voice, and words in television, radio, pictures, videotapes, film or any other form now known or hereinafter devised to promote activities of the FGTA, LPGA and the Tournament without compensation or any other benefit.
- I assume all risks and danger, known, unknown, obvious and hidden, surrounding and associated with my participation in activities and events organized and sponsored by the Tournament, including without limitation, being struck by misdirected golf balls or carts, falls on and/or around the Tournament golf course and surrounding areas, and actions of third parties, whether such risk or danger occurs prior to, during, or subsequent thereto. In consideration for allowing me to participate as a volunteer for the Tournament and all other benefits to me arising therefrom, I, my personal representatives, and administrators, heirs, and next of kin hereby waive, release, covenant not to sue, and forever discharge the Tournament, Ladies Professional Golf Association, FGTA, LLC dba the Symetra Tour, Symetra Life Insurance Company, Brook-Lea Country Club, Upstate Golf Charities, and all other persons and entities, including but not limited to, sponsors, players, employees, media producers and distributors, insurance carriers, agencies, corporations, associates, staff, volunteers, providers of first aid and independent contractors liable or who might be claimed to be liable (collectively, "Releasees") from and against any and all injuries, losses, damages, claims, actions, and any liability of any kind (including without limitation, personal injury, death, or loss or damage to personal, private or other property), whether caused by the negligence of Releasees or otherwise, as a result of or in connection with my volunteering and/or presence at the Tournament. I further agree to indemnify, defend and hold harmless the Releasees for any liability, demand, judgment, claim or suit, including reasonable costs and attorney fees, arising out of or in connection with my acts or omissions or allegations thereof as a volunteer for the Tournament and/or while I am on the Tournament property or any other property involved with the Tournament.
- In the event that I am unable to do so on my own because of injury or illness, I consent to administration of first aid and/or medical treatment, and agree to indemnify, waive, release, covenant not to sue, and forever discharge Releasees from any and all liability or claims arising out of such treatment.
- I understand that the nature of the Tournament and the participating athletes make it necessary to have in place a screening process for all volunteers. My signature on this Volunteer Waiver and Release Statement shall serve as authorization to perform a criminal history record information check in connection with my volunteer application for the Tournament. I understand that checking the approval box of this waiver on the electronic Volunteer Registration Form will serve as a substitute for my signature below.
- I, a volunteer for the Tournament, hereby attest that I have never been found guilty of, or entered a plea of guilty or of nolo contendere (i.e., no contest) to a crime determined to be a misdemeanor or felony. I further attest that I have never been judicially determined to have committed abuse or neglect against a person, child, or animal. Under penalty of perjury, I hereby declare that the attestations above are true to the best of my knowledge and belief.

I affirm that I have read this Volunteer Disclosure, Waiver and Release Statement, understand it, and agree to sign it willingly and accept its terms and conditions. This form may be released to any third party in order that the volunteer may receive medical care in the event of illness or injury.

Name: _____ Signature: _____ Date: _____

(Please Print)

MINORS: IF UNDER 18 – SIGNATURE OF PARENT OR GUARDIAN *(required)*

The undersigned, _____, referred to as the parent(s) and natural guardian(s) or legal guardian(s) of _____, does hereby represent that he/she (they) is (are), in fact, acting in such capacity and agrees to indemnify, save and hold harmless each and all of the parties herein referred to above as Releasees from all loss, liability, damage, cost or claim whatsoever that may be imposed upon said Releasees because of any defect in or lack of such capacity to so act and release said Releasees on behalf of the undersigned.

Name <i>(Please Print)</i>	Signature	Relationship to Minor