CREEK RELEAF
WAIVER and RELEASE

☐ Huntersville

Group Name: ___________________________  Group Leader: ___________________________

Creek ReLeaf tree planting events are organized and managed by Mecklenburg County, the Charlotte Public Tree Fund, Inc., the Sierra Club Central Piedmont Group and the Central Piedmont Community College (the “Organizers”). Participation in Creek ReLeaf requires the voluntary execution of this waiver and release by each adult participant and by the parents or legal guardians of each minor participant (under age 18) in the appropriate spaces below.

**Adult Participants:** With my signature I hereby acknowledge that participation carries certain risks of injury associated with the use of everyday garden tools to plant trees and agree to abide by the Organizers’ rules, policies, safety guidelines and instructions. With my signature I also release the Organizers collectively and individually from any and all liability or responsibility for any injuries or damages that I may cause or suffer as a result of participation in Creek ReLeaf. I further agree that any photographic or video images taken of me during Creek ReLeaf may be used by the Organizers to promote Charlotte Public Tree Fund events.

_________ _________________________________ __________________________________ __________________________________
Date  Printed Name    Signature   Email  Address

**Minor Participants:** As the parent/legal guardian of the minor child (under 18) named below, I hereby give permission for him/her to participate in the Creek ReLeaf tree planting. With my signature I, on behalf of myself and my minor child, hereby acknowledge that participation carries certain risks of injury associated with the use of everyday garden tools to plant trees and agree that my child will abide by the Organizers’ rules, policies, safety guidelines and instructions. With my signature I, on behalf of myself and my minor child, also release the Organizers collectively and individually from any and all liability or responsibility for any injuries or damages my minor child may cause or suffer as a result of participation in the Creek ReLeaf. I further agree that any photographic or video images taken of my minor child during Creek ReLeaf may be used by the Organizers to promote Charlotte Public Tree Fund events.

_________ ________________________________ __________________________________ __________________________________
Date Printed Name Minor      Parent/Guardian Printed Name Signature

_________ ________________________________ __________________________________ __________________________________
Date Printed Name Minor      Parent/Guardian Printed Name Signature