

Savannah State University

Waiver, Assumption of Risk, and Release of Liability Form

I, _____, for myself, my family and my assigns, hereby acknowledge my awareness that as a result of the national and local health advice to institute social distancing and limit large groups or gatherings during the Coronavirus global health pandemic, Savannah State University (SSU) has taken measures to better assure the protection of our campus community. I agree to adhere to the pandemic protection measures.

I, and my immediate family, in consideration of use of Savannah State University property for personal gardens, hereby release the Board of Regents of the University System of Georgia, Savannah State University, its officers, employees and agents, from any and all liability for injuries such as damage to or loss of personal property, sickness or injury from whatever source such as sunburn or sun poisoning, insect, reptile or other bites, allergic reactions, legal entanglements, imprisonment, death, or loss of money, which might occur while using or as a result of using, Savannah State University property for personal gardening purposes.

I agree to waive any recourse against Savannah State University for injury while gardening or any illness from the produce that is harvested. There is no relationship between the produce, the producer, and Savannah State University.

I agree the produce will be for my personal, or family use and not sold.

I agree that the gardening activity in these gardens is a voluntary activity and has no relationship to my official work at Savannah State University. I also acknowledge and agree that gardeners are not eligible for work compensation. This activity will not in any way be considered college work time.

I agree to notify Savannah State University of anyone other than my immediate family that might assist in the assigned garden area and provide a signed waiver of liability to the International Education office in advance of their participation.

I fully understand the terms set forth in this form, and I hereby execute this Waiver, Assumption of Risk and Release of Liability Form.

Student Name: _____

Student Signature: _____

Date: _____

If under 18 years of age, Parental Consent required:

I/We, the undersigned, have read this agreement and understand that it is a waiver, assumption of risk and release of all claims and that I/We, are voluntarily assuming all risks and waiving any and all claims arising out of or in any way related to the campus community garden.

Parent(s) Name: _____

Parent(s) signature: _____

Date: _____
