



CENTRO ESPERANZA
HIJAS DE LA CARIDAD LOIZA, P.R.



Release of Responsibility

Group – 18 years or older

Event: _____

Date: _____/_____/20____

1. I have been informed and understand my participation in the activities of **Centro Esperanza, Inc.** under the Heritage Tourism and Community Service Program.
2. I accept to participate in named training, field trips or tours that **Centro Esperanza Inc.** organizes in the Colobó community at the Loíza municipality and in any other place in which they celebrate activities, meetings or tour services.
3. I understand, certify and accept that the activities in which I will participate at **Centro Esperanza** or its collaborators could require physical activities that can vary between easy to moderate level. I have been informed about the requirements and appropriate clothing to participate in the activity and the environmental conditions or equipment to which I can be exposed. I confirm that I understand the requirements and conditions necessary to attend these activities.
4. I acknowledge, certify and accept, that like in any other activity, there could be accidents that can cause some type of physical damage or injury to the participants due to natural causes or as a consequence of the actions of other people.
5. I acknowledge, certify and accept that I have the emotional and physical conditions required to do all the proposed activities that may include: sun exposure, rain, walking on rough surfaces or uneven ground or other elements related to activities in nature or in **Centro Esperanza Inc.** and its collaborators.
6. As part of my participation, I am committing to review, promote and follow the safety rules and norms of conduct clearly exposed by the **Centro Esperanza's** personnel and organizers.
7. I will be responsible for any violent act, aggression or offense against any directors, co-directors, professionals, employees, volunteers, collaborators, property, facilities or any other entity that supports, or is affiliated to **Centro Esperanza Inc.**
8. I release forever and free from liability **Centro Esperanza, Inc.** its Executive Directors, Board members, their employees, facilitators, officials, and volunteers for any direct or indirect harm that I may suffer while participating in the activities, meetings, workshops, or any other venture, including the periods employed in waiting prior and post the activity and travel to or from the activity venue.
9. This release applies to the result of any acts or omission, both mine, as well as a member of my family or companions.
10. I promise to reimburse any expenses, collection invoices, sentence, resolution or order issued by any court against **Centro Esperanza, Inc.** as a consequence of any act or fault of mine. I will also pay any cost related to repairs, replacement of equipment or materials or improvements that had to be made because of my actions or omissions.
11. I authorize the representatives of **Centro Esperanza, Inc.**, their teams, agents or any official to manage any emergency or medical service that is required by an emergency situation in which I am in danger, without this representing any

