

**Volunteer Waiver and Release Agreement**

Ho‘oulu ‘Aina  
Kalihi Valley Nature Park

I acknowledge that there is an inherent risk of personal injury during park activities, such as gardening and hiking, on this and other subsequent trips to this park, and I agree that I am participating of my own volition. I recognize that I may encounter certain dangers, including, but not limited to: hiking on trails that may be wet, slippery, and steep; hiking in areas where solid footing may be obscured by vegetation; significant temperature and climate changes; working or hiking in areas where branches or trees may fall; being exposed to soil borne pathogens; and encountering dangerous debris such as glass and metal. I recognize that work gloves, long pants, long sleeves and shoes with good traction are recommended to minimize the chance of slipping or injury caused by work tools I may be using. I also understand that, apart from the Active Living Center, there are no bathroom facilities, potable water, or telephones, and that emergency care and evacuation may not be immediately available.

I agree to follow all park rules, regulations, and safety instructions, as well as all applicable laws. I acknowledge that Kokua Kalihi Valley Comprehensive Family Services and the state of Hawaii make no warranty or representation, expressed or implied, regarding the conditions that may be encountered during this and other subsequent trips.

Volunteer Work: If I will be performing volunteer work, I will assure that I have been properly instructed in and understand the use and risk of any equipment or tools that I am to use, such as saws, mattocks, hammers, picks, shovels, pitch forks, trowels, weeding implements, etc.), and I will use them properly.

I am not aware of any physical or medical condition that might endanger myself or other participants. I have notified the park caretaker, in writing, of any special medication or condition they should be aware of. I will take appropriate steps to ensure my personal health and endurance during the activity, including rest, food, water, and carrying any prescribed medication I may be taking.

I hereby release and agree to indemnify and hold harmless Kokua Kalihi Valley, its affiliates, all persons connected with Kokua Kalihi Valley and its affiliates, the State of Hawaii and their respective employees, officers, directors, trustees, agents, guests, and invitees against any and all expenses, costs, claims, causes of action or liabilities (including, without limiting the generality of the foregoing, attorneys' fees) for damages, expenses, injury, death, damage to or destruction of property, or other losses, which I, or any person claiming through me, including accompanying minors under my supervision, may have, which may arise or result from my trip to this preserve. I further agree that I will be responsible either for personally supervising minor(s) working with my group or for making arrangements for supervision of these minor(s) by another responsible adult.

This agreement is freely and voluntarily executed.

Name (Please Print) \_\_\_\_\_

Address \_\_\_\_\_

Telephone (work) \_\_\_\_\_ (home) \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

(If a minor, parent or guardian must sign)