

Release of Liability and Waiver Agreement This Release and Waiver affects your legal rights. Please read carefully.

My family, or some members of my family, will be participating in the Transitioning Families Reunification Workshop, whether by choice or court order. I understand and acknowledge that TF utilizes case-specific experiential, therapeutic, and psycho-educational tools and treatment plans that include a variety of activities. I also understand that portions of the equine, culinary, hiking and other recreational activities include physical activities that have inherent dangers and risks. I expressly assume all risk associated with the participation in any activity at TF for myself and for my children including, but not limited to, bodily injury, property damage, psychological or emotional injury, and all other injuries or negative outcomes as a result of our participation in the workshop, whether due to my actions or inactions or to the actions or inactions of others. Every attempt will be made to make every aspect of this workshop safe and helpful. This does not preclude the possibility of kids being kids. They have energy and curiosity and we anticipate that the participating parents will be aware of their childrens' whereabouts and activities.

In regards to my participation in the TF workshop, I, for myself, heirs, and assigns hereby waive any and all claims, covenant not to sue, agree to indemnify and defend, release and forever discharge Transitioning Families and its' officers, directors, clinicians, employees, independent contractors, volunteers, representatives and agents from any and all liability, loss, damage, claim, action or demand, including, but not limited to, all claims for pain and suffering, compensatory, special, consequential or punitive damages, whether known or unknown to me at the time and regardless of whether such damages were foreseeable, that arise from or in any way are attributable or related to my participation in the family workshops.

I further understand and acknowledge that the results of participating in a Transitioning Families Workshop vary and cannot be guaranteed, and that no certain or specific outcome has been promised to me.

I have carefully read and fully understand this Agreement. I am aware that this is a release of liability, a promise not to sue, and a contract between myself and Transitioning Families that will bind me, my heirs, personal representative and assigns and I agree of my own free will.

By:	
Participant Signature.	Date
Print Name	
Witness:	