

VISITOR AND VOLUNTEER WAIVER

Visitor Release & Waiver Form – Stay in Step SCI Recovery Center

THIS RELEASE & WAIVER OF LIABILITY (the “Release”) executed on the date set forth below by you, (the “Visitor”) in favor of ROMY AND GABY SCI FOUNDATION, INC. d/b/a STAY IN STEP FOUNDATION or “SIS”, a non-profit corporation, and its directors, employees, agents, and its successors, and assigns (collectively, “SIS”).

IN CONSIDERATION OF THE VISITOR BEING ABLE to visit and tour the center of SIS, observing many activities which may include but not be limited to the therapeutic modalities, activity based exercises, rehabilitative treatments, or any other related SIS activity, the undersigned Visitor does hereby freely, willfully, and without duress execute this Release and Waiver of Liability under the following terms:

WAIVER AND RELEASE: Visitor does hereby release and forever discharge and hold harmless SIS and its successors and assigns from any and all liability, claims and demands of whatever kind of nature, either in law or equity, which arise or may hereafter arise from Visitor’s visit to SIS. Visitor understands that this Release discharges SIS from any liability or claim that the Visitor may have against SIS with respect to any bodily injuries, personal injuries, illnesses, death or property damage which may result from Visitor activities at SIS whether caused by the negligence action or inaction of SIS or its directors, employees or clients or otherwise. Visitor further understands that SIS assumes no responsibility for and is not obligated in any way to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance, in the event of injury, illness, death, or property damage.

MEDICAL TREATMENT: Visitor does hereby further release and forever discharge SIS from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the Visitor’s activities with SIS.

ASSUMPTION OF THE RISK: The Visitor hereby expressly and specifically assumes the risk of injury or harm in entering the facility and releases and discharges SIS from and waives any and all liability for any injury, illness, death, or property damage resulting from the activities of the Visitor with SIS.

INSURANCE: The Visitor understands that SIS does not carry or maintain health, medical, or disability insurance for its Visitors. All Visitors are expected and encouraged to arrive with their own health insurance plans in effect.

PHOTOGRAPHIC RELEASE: The Visitor does hereby grant and convey unto SIS all right, title, and interest in any and all photographic images and video or audio recordings made by SIS during the Visitors activities with SIS, including but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

OTHER: Visitor expressly agrees that this Release is intended to be broad and inclusive as permitted by the laws of the State of Florida. Visitor agrees that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions hereof which shall continue to be encouraged. Visitor agrees that this Release is binding upon his or her executors, administrators, personal representatives, assigns or next of kin.

Visitor Name: _____

Visitor Signature: _____ Date: _____