



County of Shasta

ALERT FM RELEASE, HOLD HARMLESS, AND AGREEMENT NOT TO SUE ("RELEASE")

In consideration of receiving an ALERT FM device I, _____ (name of participant), represent that I have a financial need to participate in the County of Shasta's Alert FM donation program. Such financial need may include, but is not limited to, being (1) over the age of 60; (2) disabled; (3) in an area with low to no cellular coverage or no internet service; or (4) other condition or situation preventing me from purchasing an Alert FM device directly from ALERT FM.

I acknowledge that the County of Shasta is merely acting as distributor of the ALERT FM devices pursuant to a grant from Pacific Gas & Electric. I acknowledge that the County of Shasta does not manufacture, sell, or operate ALERT FM devices or system. Therefore, I agree to release, hold harmless, and not to sue and to indemnify the County of Shasta, its elected officials, officers, employees, agents, and volunteers from any damages or injuries of whatever nature including death that arises out of my use of the Alert FM device from whatever cause unless such damage, injury, or death is the result of the sole negligence of the County of Shasta, its elected officials, officers, employees, agents, or volunteers.

I have carefully read this Release and understand its contents. I am aware that this Release is a full release of all liability and voluntarily execute it. My signature on this document is intended to bind not only myself but also my heirs, administrators, executors, and assigns. The undersigned expressly agrees that this Release is intended to be as broad and inclusive as permitted by California law.

Signature

Date

Print Name

(Area Code) Phone number

Address

City/State

Zip Code