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### Volunteer Waiver

I, \_\_\_\_\_, understand that as a participant in the Texas Master Naturalist™ volunteer program ("program") I hereby release, discharge, and agree to hold harmless the program and its sponsoring state agencies, their agents, employees, officers and successors, from and against the program and sponsoring state agencies, their successors, employees, or officers for all personal injuries (including death), known and unknown or damage to property caused by or arising out of activities performed under the Texas Master Naturalist Program.

Chapter Affiliation: **Blackland Prairie**

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Mailing address (street / apt / PO box)

\_\_\_\_\_  
City Zip Code

\_\_\_\_\_  
Primary email address

\_\_\_\_\_  
Primary phone Mobile? Y / N Mobile? Y / N  
\_\_\_\_\_  
Secondary phone