Volunteer understands that the scope of Volunteer's relationship with Organization is limited to a volunteer position and that no compensation is expected in return for services provided by Volunteer; that Organization will not provide any benefits traditionally associated with employment to Volunteer; and that Volunteer is responsible for his/her own insurance coverage in the event of personal injury or illness as a result of Volunteer's services to Organization.

1. Waiver and release: I, the Volunteer, release and forever discharge and hold harmless Organization and its successors from any and all liability, claims, and demands of whatever kind of nature, either in law or in equity, which arise or may hereafter arise from the services I provide to Organization. I understand and acknowledge that this Release discharges Organization from any liability or claim that I may have against Organization with respect to bodily injury, personal injury, illness, death or property damage that may result from the services I provide to Organization or occurring while I am providing volunteer services.

2. Insurance: Further I understand that the Organization does not assume any responsibility for or obligation to provide me with financial or other assistance, including but not limited to medical, health, or disability benefits or insurance. I expressly waive any such claim for compensation or liability on the part of Organization beyond what may be offered freely by Organization in the event of injury or medical expenses incurred by me.

3. Medical Treatment: I hereby Release and forever discharge Organization from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during my tenure as a volunteer with Organization.

4. Assumption of Risk: I understand that the services I provide to Organization may include activities that may be hazardous to me including, but not limited to picking and handling produce, involving inherently dangerous activities. As a volunteer, I hereby expressly assume risk of injury or harm from these activities and Release Organization from all liability.

5. Permission for Photography. I grant to the Activity's photographers the permission to publish video and/or photographs of me or others listed on this Agreement in any manner and medium related to the Activity.

6. Other: As a volunteer, I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of California and that this Release shall be governed by and interpreted in accordance with the laws of the State of California. I agree

that in the event that any clause or provision of this Release is deemed invalid, the enforceability of the remaining provisions of this Release shall not be affected.

By signing below, I express my understanding and intent to enter into this Release and Waiver of Liability willingly

Hanna Bergamo
Volunteer Signature Date (11/21/2025)

Hanna BERGAMO
Print Name

Names of additional family members volunteering under the age of 18:

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____