



DEPARTMENT OF VETERANS AFFAIRS

Eastern Colorado Health Care System
1700 N. Wheeling St.
Aurora, CO 80045
(720) 723-7683

I hereby waive and discharge the Department of Veterans Affairs, the RMR VA Fisher House, and any employees, volunteers, or associates thereof, from all liability as a result of my voluntary participation at the Fisher House, whether caused by negligence or otherwise.

I understand that accidents, with fatalities, serious bodily injury and/or property damage can occur as a result of negligence or otherwise. Knowing the risks involved I nevertheless agree to assume those risks and to release all of the persons or entities mentioned above for any injury, death, illness or property damages occurred during this activity.

Print Name

Signature

Date