

Patient Release of Liability

In consideration of the opportunity to participate in Cleaning for a Reason's free home cleaning program for cancer patients, I, and my heirs, successors and assigns, hereby agree and represent as follows:

1. I am 19 years of age or older and legally competent to enter into this binding legal contract. I understand that participation in Cleaning for a Reason's home cleaning program is strictly voluntary and I freely chose to participate.
2. I understand that Cleaning for a Reason makes no warranty, express or implied, as to the quality of the cleaning services provided by its partners and volunteers under this program.
3. I understand that the partners or volunteers providing cleaning services in my home are not employed by or compensated by Cleaning for a Reason. Cleaning for a Reason makes no representation, express or implied, regarding the competency or character of any volunteer or partner providing such cleaning services.
4. I agree to release and covenant not to sue Cleaning for a Reason, its officers, employees, agents, successors and assigns from any and all liability, claims, demands, losses or damages on my account that are caused or alleged to be caused in whole or in part by the negligence, directly or vicariously, of Cleaning for a Reason, its officers, employees, agents, successors and assigns.
5. I understand that Cleaning for a Reason does not provide any insurance coverage, property, liability or medical, for me.
6. I understand that any interpretation of this release shall be governed by the laws of the State of Texas without regard to the choice of law conventions of the forum state.

I have completely read and understood this Patient Release of Liability. I am submitting this release and waiver of liability voluntarily and of my own free will. I agree to be bound the terms of it.

Patient's Signature

Printed Name

Date