

## Helping Hands Equipment Loan Waiver

The Sun City West Foundation Helping Hands service is provided in the interest of promoting public assistance with no warranty, guarantee, certification or endorsement on any of the equipment. Please complete this waiver before borrowing equipment through Helping Hands. Fill out and sign this form, then bring it with you when you pick up equipment.

### Borrower Information

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip Code

Email Address: \_\_\_\_\_ Community: \_\_\_\_\_

Would you like to join our e-newsletter? ☐ Yes ☐ No

### Liability Release Form

I am responsible for equipment that is lost, destroyed, or damaged. I agree not to remove the equipment from the Sun City West vicinity. I understand and accept responsibility for inspecting, maintaining, and properly using the loaned equipment in accordance with the manufacturer's instructions and/or my physician's instructions.

In exchange for accepting the loaned equipment in connection with this public service program, I release and discharge Sun City West Foundation and its Helping Hands division, including officers, agents, and employees, from any and all causes of action, claims, demands, damages, costs, or losses arising from the use of the loaned equipment.

I have read and understand this Liability Release Form. This release is binding on me, my spouse (if any), and all respective successors in interest, assignees, heirs, and estates.

**THIS SERVICE IS MADE AVAILABLE BY YOUR DONATIONS. THANK YOU.**

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_