

GENERAL RELEASE OF CLAIMS

Wyandot County Council on Aging, Inc. (WCCOA)
127 S. Sandusky Avenue
Upper Sandusky OH 43351
419-294-5733

Name of Client: _____

Address of Client: _____

This agreement, made with the intent to be legally bound, acknowledges that the Client named above, his or her heirs, executors, administrators and assigns, releases the Wyandot County Council on Aging, Inc. from all rights, claims, and actions that he or she may now have or may have at any time during the relationship of the parties arising out of Client’s use of the Wyandot County Council on Aging, Inc. facilities, products, or services, including its transportation services.

Client further specifically waives any claims arising from the following:

- *use of WCCOA vans or buses for transportation to and from medical appointments;
*use of WCCOA vans or buses for transportation to and from personal need stops, including but not limited to public buildings, retail establishments, and events;
*assistance of WCCOA employees and volunteers for access to and from WCCOA vans or buses for transportation to and from any place or event;
*injury or claim resulting to client while client is outside of WCCOA transportation vehicles that may occur while entering or exiting the vehicle, or that may occur while client is engaging in an activity for which transportation was provided, regardless of the location of that activity.
*injury or claim resulting to client while client is using WCCOA buildings and facilities for any purpose;
*Other: _____

This release of claims is being freely and voluntarily executed by Client, or Client’s legal representative, after being fully informed of all relevant circumstances and information related hereto, and after consulting with Client’s relevant care providers, if desired by Client.

Wyandot County Council on Aging

Client Signature

By: _____

Date: _____

* This form is effective for 1 calendar year.