

## Liability Release Form Lock Boxes

I hereby acknowledge and agree that the lock box provided by River Oak Center for Children is not 100% secure and has the potential to be broken into. I therefore agree to release River Oak, its directors, employees, representatives, and any and all persons acting on River Oak's behalf from any and all liability, claims, or demands of any nature whatsoever, including but not limited to claims for alleged personal injury, sickness or death or claims for expenses related to property damage, which may be incurred by the caregiver(s) and client participating in the use of this lock box.

Furthermore, as caregiver(s) of the child/youth participating in services from River Oak Center for Children, I (we) hereby assume the above-mentioned risks as a result of participation in any and all uses of the lock box which is the subject of this Release, whether known or unknown to me (us) through our acceptance of and use of the lock box to secure medication or other items.

I/we agree to hold harmless and indemnify River Oak from any and all liability incurred as a result of any claims based on, related to, or arising out of the use of this lock box.

I have read this document, and I am signing it freely. I understand the legal consequences of signing this document, including releasing the Released Parties from all liability, waiver of my right to sue River Oak and assume all risks associated with the use of the lock box.

Caregiver's Name		Caregiver's Signature	Date
	(Print)		
Caregiver's Name		Caregiver's Signature	Date
	(Print)		
Witness' Name		Witness' Signature	Date
Withess Walle	(Print)	Withess Signature	_ Datc
Client Name:		County ID #	
	(Print)		