SDIC Visitor Agreement & Liability Waiver

Purpose

This agreement establishes informed consent, personal responsibility, and risk acknowledgment for visitors participating in activities associated with Society of Divine Inner Connection (SDIC), its affiliated communities, projects, land trusts, volunteers, stewards, and hosts.

Assumption of Risk

I understand that participation in community activities may involve risks including but not limited to:

- Uneven terrain
- Wildlife and insects
- Gardening and land stewardship
- Construction and maintenance projects
- Shared kitchens and food preparation
- Campfires and outdoor activities
- Weather conditions
- Physical exertion
- Community events and gatherings

I voluntarily accept these risks.

Medical Disclaimer

I understand that information shared by SDIC participants, volunteers, stewards, or community members is educational in nature and is not medical advice, diagnosis, or treatment.

I remain solely responsible for my health decisions and medical care.

Personal Responsibility

I accept responsibility for:

- My choices
- My actions
- My belongings
- My transportation
- My physical and emotional wellbeing

Release of Liability

To the fullest extent permitted by law, I release and hold harmless:

- Society of Divine Inner Connection (SDIC)
- SDIC Inc.
- Land trusts
- Property owners
- Stewards
- Volunteers
- Directors
- Officers
- Community members
- Event hosts

from claims arising from my voluntary participation except where prohibited by law.

No Tenancy or Ownership Rights

My presence as a visitor does not create:

- Tenancy
- Residency
- Employment
- Ownership
- Governance authority
- Property rights

within the community or property.

Community Boundaries

I understand that participation is by invitation and may be ended at any time.

If requested to leave, I agree to do so respectfully and promptly.

Acknowledgment

I have read this agreement.

I understand its contents.

I voluntarily agree to participate.

Visitor Name: _____

Signature: _____

Date: _____

Emergency Contact: _____

Phone: _____