

**Waiver, Release and Hold Harmless Agreement**  
Manager Education Committee Mentoring Program

Name of Participant: \_\_\_\_\_  
Address of Participant: \_\_\_\_\_

Circle One: Mentor / Mentee

I, the above named participant, have voluntarily applied to participate as a Mentor or Mentee in the Community Association Institute – West Florida Chapter’s Mentor/Mentee Program. In consideration of my participation as a Mentor or Mentee, I hereby agree to release and indemnify and hold harmless the Mentors, Community Association Institute – West Florida Chapter, its governing board, officers, employees, or agents from any and all liability, responsibility, claims, and demands which arise or hereafter arise from any advice given or received through my participation in the Mentor/Mentee Program. I further acknowledge and understand that Mentors are not giving legal advice to Mentees in connection with this program. I agree that this release is effective immediately.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of Participant