<mark>PO NAME</mark> DATE

<u>All</u> **PO NAME** members (not just officers) understand and acknowledge that they are jointly and severally liable for the obligations or liability of **PO NAME**. The absence of liability insurance places their personal assets immediately at risk in the event of **PO NAME** obligations or liability.

<u>All</u> new members of **PO NAME** will be briefed and required to acknowledge and sign this liability form, which will be kept on file as a living document with (**name of officer and/or location**).

| | Printed Name | Signature | Date |
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Updated 20 February 2020