

**RORIPAUGH HILLS OWNERS ASSOCIATION  
RELEASE, HOLD HARMLESS AND INDEMNIFICATION AGREEMENT**

Homeowner or Tenant (with Assigned Privileges)

**Exhibit "1"**

Names:

\_\_\_\_\_  
(Last) (First) (Last) (First)

\_\_\_\_\_  
(Last) (First) (Last) (First)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Mailing Address)

Roripaugh Hills  
\_\_\_\_\_  
(Development) (Tract) (Lot)

\_\_\_\_\_  
(Home Phone) (Work Phone) (Work Phone)

Key Issued \_\_\_\_\_ Yes \_\_\_\_\_ Key # \_\_\_\_\_ No

Please list the names of all children who are in residence and their birth dates (or any other persons in residence);

1. \_\_\_\_\_ 2. \_\_\_\_\_  
3. \_\_\_\_\_ 4. \_\_\_\_\_  
5. \_\_\_\_\_ 6. \_\_\_\_\_

I ACKNOWLEDGE AND AGREE, on behalf of myself, and my family, that the use of areas operated by Roripaugh Hills Owners Association, including but not limited to all native areas/slopes, landscaped and recreational areas; tennis courts, swimming pools and spa, cabana buildings including restrooms and shower, tot lot, parks, lookout and trails, and native and landscaped areas, involve a potential risk of serious injury to a person undertaking these activities or using these athletic and recreational facilities. I FULLY UNDERSTAND that athletic or recreational activity, by its very nature, can be hazardous and that it can lead to injury to me or damage my personal belongings.

\_\_\_\_\_  
(Initial)

**Roripaugh Hills Owners Association  
Release, Hold Harmless and Indemnification Agreement  
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I UNDERSTAND that by signing this form I, my family and my guests AGREE TO ASSUME THE INHERENT RISKS of potential injury to which I am voluntarily exposing myself, my family and my guests by participating in activities on the facilities of Roripaugh Hills, and that I HAVE RECEIVED, READ AND AGREE to abide by the Rules and Regulations for the Roripaugh Hills Owners Association.

On behalf of myself, my family and my guests, I AGREE TO INDEMNIFY AND HOLD HARMLESS RORIPAUGH HILLS OWNERS ASSOCIATION, its officers and directors, agents (excluding independent contractors), and/or employees, from claims arising from the intentional wrongful acts, gross negligence or negligence of myself, my family, and/or my guests, as a result of such activities.

**I HAVE READ AND AGREE TO THE FOREGOING:**

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(Signature)

(Date)

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(Drivers License Number)

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(Signature)

(Date)

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(Drivers License Number)

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(Initial)