

RELEASE FROM LIABILITY

WHEREAS, _____ (Consumer) has asked Ramsey County to place him/her in the Consumer Support Grant Program so that the Consumer may directly purchase the supports needed to live independently as possible, and

WHEREAS, Ramsey County has found the Consumer eligible for a Consumer Support Grant.

Now IT IS AGREED among the parties as follows:

1. The Consumer understands that by accepting the Consumer Support Grant he/she is responsible for finding and purchasing of the supports identified on the Budget/Service Agreement Form.
2. The Consumer understands that by purchasing supports he/she may enter into an employee/employee relationship for the provision of some services.
3. The Consumer, by his/her signature hereto, releases the County from any and all responsibility, claims or liability that might be asserted against it arising out of the use, by the Consumer, of a provider's services.

These releases of liability are given to the County in recognition of the fact that the County makes no absolute assurances as to the capabilities of either the Consumer or the Provider chosen by the Consumer, and in recognition of the fact that the ultimate selection of the Provider by the Consumer and the Provider's agreement to enter the employment of the Consumer are the sole responsibility and decision of the Consumer and the Provider.

It is further understood by the Consumer and the County as follows:

- A. The County will not exercise any right to control the details of the work done by the Provider. This right will be exercised by the Consumer.
- B. The County will not furnish any equipment or tools for the performance of the work. All necessary equipment or tools shall be furnished by the Consumer.
- C. The County will not exercise any right to terminate an employment relationship existing between the Consumer and the providers. The right to terminate an employment relationship rests with the Consumer and the providers.
- D. The Consumer recognizes that he/she has the right to hire providers, to determine the hours the providers work, and to determine how the provider works and what the provider is to accomplish.
- E. The Consumer recognizes that he/she is responsible for complying with the Social Security Act, the Unemployment Compensation Act and any other federal and state laws and regulations governing employers.

Consumer Signature _____ Date _____

Authorized Representative Signature _____ Date _____

County Representative Signature _____ Date _____