

## PAINT SHARE LIABILITY RELEASE FORM

Send Completed Form to Product Care via Email: <a href="mailto:bcopspaint@productcare.org">bcopspaint@productcare.org</a> or Fax: 604.592.2982

	THIS	DOCUMENT	IS A <u>LIABILITY RELEASE</u> I	FORM – PLEASE READ	IT CAREFU	JLLY		
TO: Product	Care Association	AND TO:						
			Collection Site Owner/Operator –	follection Site Name and Address (Full Mailing Address)				
	nd contractors (collectively		d as part of a free "Paint Share" in the BC Paint D REPRESENTATION OR WARRANTY AS TO THE					
•	•		een inspected by the Program. I ACCEPT ALL R from the receipt and/or use of this Product and				•	
-	I have any reason to susper area without charge.	ct that the Product has b	een altered in any way or that the contents are	not represented by the original label inf	ormation, I should r	not use this Produ	ct and return it to	a Paint
DATE: (Please Print)	NAME: (Please Print)		SIGNATURE: (Confirming Release of Liability)	PHONE NUMBER: (Please Print)	LATEX # of containers		ALKYD (OIL) # of containers	
					1 GAL	5 GAL	1 GAL	5 GAL
				CONTAINER TOTALS:				
	· Name		on Site Operator's Name (Please print)					