

Parent 1 (first, last name) : _____

Parent 2 (first, last name) : _____

Phone: _____ Email: _____

Address: _____

Infant's Name & Date of Birth: _____

Many American medical authorities, including the American Academy of Pediatrics, recommend against direct mother-to-mother milk sharing as an option for infant feeding, citing health risks that include the transmission of serious illnesses. The U.S. Food and Drug Administration (FDA) has also warned about the dangers posed by using another woman's milk; risks for the baby include exposure to infectious diseases, to chemical contaminants, and to a limited number of prescription drugs that might be in the human milk, if the donor has not been adequately screened. In addition, if human milk is not handled and stored properly, it could, like any type of milk, become contaminated and unsafe to drink. The FDA recommends that a baby's mother first consult with a healthcare provider, and if, after the consultation, the mother decides to receive human milk from a source other than the mother herself, she should only use milk from a source that has screened its milk donors and taken other precautions to ensure the safety of its milk. Families who choose to utilize milk from Mothers' Milk Alliance (MMA) recognize that in doing so they are stepping outside of the current U.S. medical mainstream and that they take responsibility for that decision. In the interests of protecting all involved – donors, recipients and MMA coordinators – and in keeping with a strong commitment to facilitating recipients' informed choice, the following Waiver and Release clarifies the scope and nature of this responsibility. **Please do not sign this Waiver and Release unless you fully understand and agree to its contents.**

By my signature below, I confirm my understanding of and agreement with all of the following:

I understand that I am receiving human breast milk that has been voluntarily donated to MMA by donors who have undergone a *limited* health history and screening with a nationally board certified midwife licensed in the state of Wisconsin. Donors have also been offered milk handling and storage education and instruction, which are offered in two ways, verbally from MMA coordinators and in writing from the documents entitled "Pumping and Handling Guidelines for Donors" and "Handling and Storage Guidelines for Recipients." I understand that the donated milk itself has not been tested or pasteurized.

I understand that the handling, storage, and sharing of human breast milk carries inherent risks that may result in illness, disease, or death. I understand that while MMA has undertaken the above-described screening and education with respect to any human who consumes it, neither MMA nor any of its donors, officers, directors, or agents make any warranties or guarantees, express or implied, with respect to the wholesomeness, quality, or health characteristics of donated milk. In addition to risks related to disease transmission, I understand that milk composition varies according to individual donor's diets and exposures, the age of the donor's infant, and the duration of milk storage.

With full acknowledgement of potential risks associated with the handling, storage, and sharing of human breast milk, I, on my own behalf and on behalf of any and all of my children who consume donated milk from MMA, accept all risk and responsibility of using and consuming donated milk and any activity incidental thereof. I also hereby discharge and release MMA and all of its donors, officers, directors, and agents both on my own behalf and on behalf of any and all of my children who consume donated milk from MMA, from any and all liability for any personal injury, disease, illness, sickness, adverse health effect or risk, including, but not limited to, risks of property damage or wrongful death that may result from using or consuming donated milk, whether or not caused by the act, omission, negligence, or other fault of MMA or any of its donors, officers, directors, or agents. I agree that under no circumstances will I or any third-party, on my own behalf or

on behalf of any or all of my children who consume donated milk from MMA, present any claims against MMA or any of its donors, officers, directors, or agents for using and consuming donated milk or any activity incidental thereof.

I have read and fully understand the terms of this Waiver and Release. I intend my signature to be a complete and unconditional waiver and release of all liability of MMA and its donors, officers, directors, or agents for any personal injury, disease, illness, sickness, adverse health effect or risk, including but not limited to risks of property damage, or wrongful death that may result from using or consuming donated milk to the greatest extent allowed by law. I understand that this Waiver and Release will remain in effect unless revoked in writing. I hereby agree to the terms of this Waiver and Release by signing freely and voluntarily.

Signature (of at least one parent)

Date

<p>For Office Use Check one: One-time Recipient _____ On-Going Recipient _____ Unsure _____</p> <p>Special recipient circumstances or milk needs: _____</p> <p>_____</p> <p>Donation(s) toward operation costs (amount/date): _____</p> <p>Other notes: _____</p> <p>_____</p>
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