

**HAI GROUP**  
**RESIDENT SCHOLARSHIP PROGRAM**  
**SCHOLARSHIP RECIPIENT**  
**2025 Affidavit of Eligibility, Publicity Release, and Liability Waiver**

**State of Connecticut**  
**County of New Haven**

I, \_\_\_\_\_ (*your full name*), being duly sworn according to law, depose and say that:

I have read and understand this Affidavit of Eligibility, Publicity Release, and Liability Waiver (the “**Affidavit**”), which applies to me as a recipient of the RESIDENT SCHOLARSHIP PROGRAM pursuant to the rules defined in the *Official Rules of the Resident Scholarship Program* (attached hereto) (“**Official Rules**”), which is sponsored by Housing Authority Insurance, Inc., located at 189 Commerce Court, Cheshire, CT 06410 (“**Sponsor**”).

In consideration of a potential \$6,000 scholarship (the “**Scholarship**”) being awarded to me, and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, I hereby agree as follows:

1. I am submitting this Affidavit with the understanding that it will be relied upon by Sponsor to determine my eligibility to receive the Scholarship, as defined and set forth in the Official Rules. I agree that the determination of my eligibility may include a complete state and federal background check. The Scholarship shall not include any expenses not specified in the Official Rules. I further acknowledge and agree that if I reject the Scholarships, Sponsor reserves the right to award that Scholarship to another entrant.
2. I hereby represent and affirm that I have read, have complied with, and will continue to comply with all the rules, regulations, and terms and conditions set forth in the Official Rules; that all of the information I have provided and will provide has been and will be true, accurate, and complete; that I have not perpetrated and will not perpetrate any fraud or deception in connection with the Resident Scholarship Program; and that I have not sought to influence the outcome of the program other than by participating in the program as expressly permitted in the Official Rules. In the event of any conflict between the terms and conditions contained in the Official Rules and the terms and conditions contained in this Affidavit, the conflicting terms and conditions contained in this Affidavit will be deemed to control and prevail.
3. I hereby indemnify Sponsor from and against any and all losses or damages (including attorneys’ fees) arising out of or relating to any statements or representations made by me in this Affidavit or otherwise in connection with the Resident Scholarship Program. I agree to return immediately upon demand to Sponsor the value of the Scholarship that has been or may be awarded to me if any statement or representation made by me in this Affidavit is discovered or believed to be false or misleading, and I acknowledge and agree that all available legal and equitable remedies may be pursued against me in connection therewith.
4. I represent and affirm that this Affidavit does not conflict with any other commitments or obligations on my part. I agree that this Affidavit supersedes all prior negotiations and understandings between

me and Sponsor relating to the rights granted herein and that no provision of this Affidavit can be modified by any other instrument or document unless in writing and signed by me and Sponsor.

5. I further understand and agree that all rights under Section 1542 of the Civil Code of California ("Section 1542") and any similar law of any state or territory of the United States that I may have with respect to the foregoing release are hereby expressly and forever waived. I understand that Section 1542 provides that:

A GENERAL RELEASE DOES NOT EXTEND TO CLAIMS WHICH THE CREDITOR DOES NOT KNOW OR SUSPECT TO EXIST IN HIS FAVOR AT THE TIME OF EXECUTING THE RELEASE, WHICH, IF KNOWN BY HIM MUST HAVE MATERIALLY AFFECTED HIS SETTLEMENT WITH THE DEBTOR.

6. I acknowledge and agree that I may not transfer or substitute a Scholarship for any other item or prize. I further acknowledge and agree that Sponsor reserves the right to substitute a Scholarship for one of equal or greater value at its sole discretion.
7. I acknowledge and agree that I am solely responsible for any costs (including, without limitation, any federal, state, or local taxes or costs not included in the Scholarship) that I may incur as a result of being awarded the Scholarship.
8. I represent that, if selected as a Scholarship Recipient ("**Recipient**"), I am eligible to receive the Scholarship awarded to me. Without limiting the foregoing, I represent that I satisfy all of the eligibility requirements set forth in the Official Rules, which I acknowledge having read and understood, and any other requirements imposed by law. Specifically, I hereby represent that:
- (a) I am at least sixteen (16) years old at the time of entry and, if less than the age of majority in the State in which I am a legal resident, have entered the Resident Scholarship Program with the permission of my parent or legal guardian and that I or they are authorized to sign this Affidavit;
  - (b) I reside in a housing authority or in a property with a Housing Choice Voucher (HCV) administered by a housing authority that is a Member of Housing Authority Risk Retention Group, Inc. (HARRG) or Housing Authority Property Insurance, A Mutual Company (HAPI) or have reside in an affordable housing property insured by Housing Enterprise Insurance Company, Inc. (HEIC); or I am exempt from the above since I am an individual who fulfilled the requirements in the Official Rules during the scholarship entry period who was declared a scholarship recipient and I am in receipt of the award by the Sponsor during the four-consecutive-year term of the academic scholarship period awarded.
  - (c) I am or will be enrolled in the fall for the 2025-2026 academic year in an accredited and/or licensed technical school or accredited two- or four-year college or university in the United States.
  - (d) I am a legal resident of one of the fifty United States or the District of Columbia, excluding Puerto Rico and US territories and possessions;
  - (e) From and after January 1, 2025, neither I nor a member of my immediate family (parents, children, siblings, spouse) or members of the same household (whether related or not) was or is an employee, officer, director, or agent of Housing Authority Insurance, Inc., or individual public housing authorities and their respective parent companies, subsidiaries, affiliates,

partners, advertising and promotion agencies, manufacturers, or distributors of Scholarship materials;

- (f) Neither I nor a member of my immediate family was or is engaged in the development, production, distribution of materials, or drawing of the Recipients for this Scholarships;
  - (g) I have and will continue to have all rights and licenses necessary to grant, unencumbered, the rights and licenses granted in this Affidavit. I further acknowledge and agree that neither Sponsor nor any third party shall be obligated to exercise any rights or licenses granted herein.
  - (h) I have not received the Resident Scholarship award four times consecutively.
9. I hereby irrevocably grant Sponsor and its designee(s) and licensee(s) the unrestricted, absolute, royalty-free, perpetual, worldwide and irrevocable right, without additional compensation, consideration or notice to or permission required from me or any third party:
- (a) to use my name, image, persona, voice, likeness, photograph, appearance, biographical data, personal background information, life story, statements, any other recognizable feature of me, in written and oral communications, in whole or in part, as such may be embodied in any pictures, photographs, audiovisual recordings, video recordings, audio recordings, digital images, statements, submission, and the like, created or made by me or taken or made on behalf of Sponsor in connection with the Scholarship or any promotional or marketing activities of Sponsor (hereinafter, “**Works**”) for any and all of the Purposes (as defined below) as Sponsor or its designee(s) or licensee(s) should so choose. As used in this Affidavit, “**Purposes**” means, collectively, to re-use, adapt, copy, duplicate, display, modify, distribute, publicly perform, publish, broadcast, reproduce, transmit, create derivative works of re-publish and otherwise use, in whole or in part, by any means or method now known or later developed, severally or in conjunction with any other works, including, without limitation, photographs, statements, including, but not limited to illustrations, bulletins, exhibitions, videotapes, reprints, reproductions, publications, movies, films, plays, advertisements, and/or any promotional or educational materials in any medium now known or later developed, including the Internet.
10. I agree to participate in interviews with the media related to my involvement as a Scholarship Recipient in the program. As part of my participation, I will partake in any necessary media training sessions to ensure proper delivery of program messaging, the necessity of which is in the sole discretion of Sponsor. Subsequently, I agree to participate in additional interviews with the media if selected as a Scholarship Recipient.
11. I understand that any material I submitted into the Resident Scholarship Program is the sole property of Sponsor and may be used by Sponsor for any purpose.
12. I, ON BEHALF OF MYSELF, MY HEIRS, EXECUTORS AND ADMINISTRATORS, AND ANY OTHER PERSON(S) WHO MAY TAKE BY OR THROUGH ME, HEREBY RELEASE, FOREVER DISCHARGE AND AGREE TO HOLD HARMLESS SPONSOR AND ALL OF ITS RESPECTIVE PARENT COMPANIES, SUBSIDIARIES, AFFILIATES, ADVERTISING AND PROMOTIONAL AGENCIES, AND EACH OF ITS OFFICERS, DIRECTORS, EMPLOYEES, AGENTS, SHAREHOLDERS, AND ADVISORS (INDIVIDUALLY, A “**RELEASED PARTY**,” AND COLLECTIVELY, THE “**RELEASED PARTIES**”), FROM AND AGAINST ANY LIABILITY FOR ANY AND ALL CLAIMS, DEMANDS, LOSSES, AND LIABILITIES OF ANY NATURE WHATSOEVER WHICH I MAY NOW OR HEREAFTER BE ENTITLED TO ASSERT, INCLUDING BUT NOT LIMITED TO ANY DEATH, INJURY, LOSS OF ENJOYMENT, PROPERTY DAMAGE, OR OTHER HARM OR LOSS OF ANY NATURE, ANY CLAIMS BASED ON PUBLICITY

RIGHTS, PRIVACY RIGHTS, PERSONALITY RIGHTS, "MORAL RIGHTS," OR DEFAMATION, AND ANY AND ALL ANY TAXES LEVIED, ASSESSED OR COLLECTED, WHETHER CAUSED BY, CONTRIBUTED TO, ARISING OUT OF, OR OTHERWISE RELATED TO THE RESIDENT SCHOLARSHIP PROGRAM, THE SCHOLARSHIP, OR MY POSSESSION, ACCEPTANCE, USE, OR MISUSE THEREOF, OR MY OTHER ACTS OR OMISSIONS IN CONNECTION THEREWITH.

13. If any provision of this Affidavit is found to be unenforceable in any respect by a court, it is my intention and understanding that this Affidavit shall nonetheless be enforced to the maximum extent to which it is found by the court to be legally enforceable. To the extent permitted by applicable law, I hereby waive the benefit of any provisions of any statute or other law that might adversely affect the rights of Sponsor or any Released Party under this Affidavit.
14. This Affidavit shall be governed by the laws of the State of Connecticut, without reference to its choice of law rules. I irrevocably consent to the exclusive jurisdiction and venue of the federal and state courts located in New Haven County, Connecticut, with respect to any claim or suit arising out of or in connection with this Affidavit, the Resident Scholarship Program, any delivery, misdelivery, or nondelivery of a Scholarship, or my acceptance, participation in, use of, or inability to use any given Scholarship, and agree not to commence or prosecute any such claim or suit other than in the aforementioned courts.
15. This Affidavit constitutes the entire agreement between myself and Sponsor with respect to matters described herein, and supersedes any and all other agreements and communications, oral and written, between myself and Sponsor or any other Released Party with respect to such matters. This Affidavit may not be amended or supplemented except in writing which has been signed by Sponsor specifically referencing this Affidavit.
16. I hereby certify that the information listed in this Affidavit is true and correct, and I understand that I will be disqualified from receiving, and agree to return to Sponsor, any Scholarship, or the value thereof, which may have been awarded to me if any statement made by me in this Affidavit is false. I further state that I have read the above Affidavit prior to its execution and that I fully understand its contents.

**THIS IS A LIABILITY RELEASE**  
**PLEASE READ CAREFULLY BEFORE SIGNING**

I have been given a full opportunity to review and analyze this Affidavit as well as the Official Rules for this Resident Scholarship Program. I fully and completely understand all of the terms of this Affidavit and sign it voluntarily, freely, and knowingly. I acknowledge and agree that this is a complete RELEASE and DISCHARGE of all claims and rights of the undersigned against the Released Parties and that no action will be taken by or on behalf of the undersigned with respect to any such claims or rights, it being understood that this release shall be binding upon my heirs, executors, and administrators, and anyone claiming by or through me.

The signature of the Applicant operates as an acceptance of the terms and conditions of this document.

**Applicant**

Signature: \_\_\_\_\_

Name (please print): \_\_\_\_\_

Date: \_\_\_\_\_

***If Applicant is a Minor:***

Name of minor: \_\_\_\_\_

Name of guardian: \_\_\_\_\_

Signature of guardian: \_\_\_\_\_

In the presence of witness: \_\_\_\_\_

Date: \_\_\_\_\_

**Applicant Address**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(    ) \_\_\_\_\_

Applicant Telephone Number

\_\_\_\_\_

Applicant Email Address

Accredited two- or four-year technical school, college or university in which I plan to be/am currently enrolled for the fall of 2025:

School Name: \_\_\_\_\_

Student ID: \_\_\_\_\_

Full Address of School: \_\_\_\_\_

\_\_\_\_\_