

WAIVER

I, the undersigned,

Name of the complainant

With the full understanding of my rights, by submitting this complaint, hereby:

1. Confirm that I have not instituted legal proceedings in respect of the article that I am complaining about.
2. Waive any claim that I may have against Independent Media or any other person who is employed by Independent Media arising from the publication of the article that is the subject matter of this complaint.
3. Agree to forego the right to institute any litigation proceedings arising from the subject matter of the complaint.
4. Agree to be bound by the ruling of the Ombuds or the Ombuds Appeals Chair.
5. Understand that this waiver does not preclude my rights to have a decision of the Ombuds or the Ombuds Appeal Chair reviewed in terms of the rules of court.

Signature	Date
COMPLAINANT	
Signature	Date
WITNESS	