



RELEASE and WAIVER of LIABILITY FOR MINORS (under 18)

PLEASE READ CAREFULLY! THIS IS A LEGAL DOCUMENT THAT AFFECTS YOUR LEGAL RIGHTS

The Volunteer and Guardian hereby freely, voluntarily, and without duress execute the Release under the following terms:

MUST BE COMPLETED BY PARENT/GUARDIAN AND MINOR

Waiver and Release.

Volunteer and Guardian do hereby release and forever discharge and hold harmless Habitat and its successors and assigns from any and all liability, claims and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from Volunteer's work for Habitat.

Volunteer and Guardian understand and acknowledge that this Release discharges Habitat from any liability or claim that the Volunteer or Guardian may have against Habitat with respect to any bodily injury, personal injury, illness, death, or property damage that may result from Volunteer's work for Habitat, whether caused by the negligence of Habitat or its officers, directors, employees, or agents or otherwise. Volunteer and Guardian also understand that, except as otherwise agreed to by Habitat in writing, Habitat does not assume any responsibility for or obligation to provide financial assistance or other assistance, including, but not limited to medical, health, or disability insurance, in the event of injury or illness.

It is the policy of Habitat that children under the age of 14 not be allowed on a Habitat worksite while there is construction in progress. It is further the policy of Habitat that, while children between the ages of 16 and 18 may be allowed to participate in construction work, ultra hazardous activity such as using power tools, excavation, demolition, or working on rooftops is not permitted by anyone under the age of 18.

Medical Treatment.

Except as otherwise agreed to by Habitat in writing, Volunteer and Guardian do hereby release and forever discharge Habitat from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the Volunteer's work for Habitat.

Assumption of the Risk.

The Volunteer and Guardian understand that the work for Habitat may include activities that may be hazardous to the Volunteer, including, but not limited to, construction, loading and unloading, and transportation to and from the work sites. In connection thereto, Volunteer and Guardian recognize and understand that activities at Habitat may, in some situations, involve inherently dangerous activities.

Volunteer and Guardian hereby expressly and specifically assumes the risk of injury or harm in these activities and releases Habitat from all liability for injury, illness, death, or property damage resulting from the activities of the Volunteer's work for Habitat.

Insurance.

The Volunteer and Guardian understand that, except as otherwise agreed to by Habitat in writing, Habitat does not carry or maintain health, medical, or disability insurance coverage for any Volunteer.

Photographic Release.

Volunteer and Guardian do hereby grant and convey unto Habitat all rights, titles, and interest in any and all photographic images and video or audio recordings made by Habitat during the Volunteer's work for Habitat, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings

Other.

Volunteer and Guardian expressly agree that this release is intended to be as broad and inclusive as permitted by the laws of the State of Maryland, and that this Release shall be governed by and interpreted in accordance with the laws of the State of Maryland. Volunteer and Guardian agree that in the event that any clause or provision of this Release shall be held invalid by a court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of the Release which shall continue to be enforceable.

IN WITNESS WHEREOF, PARENT/GUARDIAN/VOLUNTEER has executed this Release as of this date: _____

PARENT OR GUARDIAN MUST COMPLETE; PARENT SIGNATURE _____ RELATIONSHIP _____

PLEASE SIGN:

VOLUNTEER: _____

WITNESS: _____

EMERGENCY CONTACT: _____

EMER CONTACT PHONE _____

ALLERGIES: _____

PLEASE PRINT CLEARLY:

VOLUNTEER: _____

E-MAIL: _____

ADDRESS: _____

CITY, STATE, ZIP _____

PHONE: CELL _____

HOME: _____