SAMPLE VOLUNTEER LIABILITY RELEASE FORM

Volunteer Liability Release Form (Example 1)
(Note: All liability forms should be reviewed by a lawyer)

In consideration of my desire to serve as a volunteer in relief efforts to be conducted by , I hereby assume all responsibility for any and all risk of property damage or bodily injury that I may sustain while participating in any voluntary relief effort, disaster exercise or other activity of any nature, including the use of equipment and facilities of .

Further, I, for myself and my heir, executors, administrators and assigns, hereby release, waive and discharge and its officers, directors, employees, agents and volunteers of and from any and all claims which I or my heirs, administrators and assigns ever may have against any of the above for, on account of, by reason of or arising in connection with such volunteer relief efforts or my participation therein, and hereby waive all such claims, demands and causes of action.

Further, I expressly agree that this release, waiver and indemnity agreement is intended to be as broad and inclusive as permitted by the State of , and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I currently have no known mental or physical condition that would impair my capability for full participation as intended or expected of me.

Further, I have carefully read the foregoing release and indemnification and understand the contents thereof and sign this release as my own, free act.

Date: ______  Signature: ______________________  Print Name: ______________________
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Performance Authorization, Release, and Waiver of Liability
(Example 2)
(Note: All liability forms should be reviewed by a lawyer)

In consideration of the permission granted to me by (Agency) to participate and/or have my video, audio, photographic and other copyrighted materials used (hereinafter referred to, collectively, as “My Participation”) in the (Project/Program), I hereby release (Agency), the State of _______, the Board of Directors, (Partner A), (Partner B), and their officers, employees and agents from all actions, damages, or claims which I or my assigns may have against them which may be incurred as a result of My Participation in the above-described Program.

Further, I agree to indemnify and hold harmless (Agency), the Board of Directors, (Partner A), (Partner B), and their officers, employees and agents from any liability, loss or expenses arising from any claim or litigation that My Participation in the Program including my statements or actions, or material furnished by me violated or infringed the rights of third parties.

I authorize the use of my name, voice, photograph, likeness, performance and/or biography by (Agency), the Board of Directors, (Partner A), (Partner B), and their officers, employees and agents in connection with any use of a product arising out of My Participation in the above-described Program. I authorize (agency) to obtain and hold copyrights in such Program and products, and to edit my performance and materials in its sole discretion.

I understand that (Agency), (Partner A), or (Partner B – etc) has no obligation to air the Program, and that I will receive no monetary compensation for the rights granted herein. I understand and affirm that this Authorization and Release shall be considered consent to such use by (Agency) under the provisions of (State) Statutes.

I, the undersigned, am at least 18 years of age or I am the parent or guardian of a participant who is less than 18 years of age. I have read this Performance Authorization, Release, and Waiver of Liability and understand all its terms. I execute it voluntarily and with full knowledge of its significance.

Signature of Participant ___________________________ Date ___________ Witness ___________________________

Printed Name ________________________________

Signature of Guardian ___________________________ Date ___________ Witness ___________________________

Printed Name ________________________________
SAMPLE VOLUNTEER LIABILITY RELEASE FORM

Parental Consent Form (Example 3)
(Note: All liability forms should be reviewed by a lawyer)

* If you 18 or over, you do NOT need a parental consent form.

I, the parent or guardian of ____________________________, give my voluntary consent to his/her participation in (Agency)’s (Program Name), (Dates).

I hereby release (Agency), the State of __________, the Board of Directors, ___(Partner A)___, ___(Partner B)___, and their officers, employees and agents from any and all liability resulting from events beyond control.

In the event of an accident, injury, or illness, the above stated and its agents do not assume any responsibility or obligation to provide financial assistance or other assistance, including but not limited to, medical, health, or disability insurance, in the event of an accident, injury, illness, death or property damage. In the event of an accident, injury, or illness, the above stated and its agents will make every effort to contact parents/guardians immediately if necessary.

Furthermore, I release (Agency), the State of __________, the Board of Directors, ___(Partner A)___, ___(Partner B)___, and their officers, employees and agents and volunteers for any loss, personal injury, accident, misfortune, or damage to the above name or his/her property, with the understanding that reasonable precautions shall be taken to ensure the health and safety of the above name.

__________________________________ __________________________________
Signature of Parent/Guardian Date

__________________________________ __________________________________
Printed Name of Parent/Guardian Phone Number

Participation Waiver

In consideration for participating in ___(Project)___, during ___(Dates)___, I assume responsibility for all my actions while at ___(location)___, facilities, traveling to and/or from any such facility, or engaged in an activity under the supervision of my adult team leader, and/or ___(Agency)___ staff and volunteers.

Furthermore, I ___(Agency)___, the State of __________, the Board of Directors, ___(Partner A)___, ___(Partner B)___, and their officers, employees and agents and volunteers for any loss, personal injury, accident, misfortune or damage to myself or my property, with the understanding that reasonable precautions shall be taken to ensure the health and safety of myself and my property.

__________________________________ __________________________________ _________________
Signature of Participant Printed Name Date