



Volunteer Waiver Form

Important: Each participant must sign the "Release and Waiver Liability" before working on a HOPE worldwide volunteer site. Read this waiver very carefully before you sign. Waiver applicable 1 year from date of signature:

Release and Waiver of Liability

This Release and Waiver of Liability (the "Release") executed on this _____ day of _____, 2017, by _____ in favor of HOPE *worldwide*, a nonprofit corporation organized and existing under the laws in the United States, USA, INC., a nonprofit corporation, and each of their directors, officers, employees, and agents. The volunteer desires to work for HOPE *worldwide* and engage in the activities related to being a volunteer for a work project. I, the volunteer hereby freely and voluntarily, without duress, execute this Release under the following terms:

- 1. Waiver and Release.** I, the volunteer release and forever discharge and hold HOPE *worldwide* 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 here after arise from my volunteer work at HOPE *worldwide*. I, the volunteer understand and acknowledge that this Release discharges HOPE *worldwide* from any liability or claim that volunteer and minor may have against HOPE *worldwide* with respect to bodily injury, personal injury, illness, death, or property damage that may result from participation in the HOPE *worldwide* work. It is also understood that HOPE *worldwide* 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, illness, death or property damage.
- 2. Insurance.** I, the volunteer understand that I expressly waive any such claim for compensation or liability on the part of HOPE *worldwide* beyond what may be offered freely by the representative of HOPE *worldwide* in the event of such injury or medical expense.
- 3. Medical Treatment.** I, the volunteer, hereby release and forever discharge HOPE *worldwide* from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during the minor's time with HOPE *worldwide*.
- 4. Assumption of Risk.** I, the volunteer, understand that the time with HOPE *worldwide* may include activities that may be hazardous to me including, but not limited to, construction activities, loading and unloading of heavy equipment and materials, and local transportation to and from work sites. Also I, the volunteer recognize and understand that the time with HOPE *worldwide* may, in some situations, involve inherently dangerous activities. As the volunteer, I hereby expressly assume the risk of injury or harm in these activities and release HOPE *worldwide* from all liability for injury, illness, death or property damage resulting from the activities of the minor's time at HOPE *worldwide*.
- 5. Photographic Release.** As the volunteer, I grant and convey unto HOPE *worldwide* all right, title, and interest in any and all photographic images and video or audio recordings made by HOPE *worldwide* during the work with HOPE *worldwide*.
- 6. Other.** As the volunteer I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Pennsylvania in the United States of America, and that this Release shall be governed by and interpreted in accordance with the laws of the State of _____. I agree that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release, which shall continue to be enforceable.

To express my understanding of this Release, I sign here.

Name of Volunteer: _____ Date: _____

Signature of Volunteer _____

Street Address: _____ Phone: _____

City, State, Zip: _____ Email: _____

Church and/or Campus Ministry: _____

Emergency Contact: _____ Phone: _____

Medical Conditions _____

If volunteer is under the age of and 18 (a minor), this Release and Waiver of Liability must also be signed by a parent or legal guardian.

Name of Parent/Guardian: _____ Date: _____

Signature of Parent/Guardian _____