



Release and Waiver of Liability

Volunteer Name:

Age:

Individual
 Group_____

This Release and Waiver of Liability (the "Release") is executed on this ____ day of _____ 20__ by _____ (the "volunteer") and _____ (the "Guardian", if the Volunteer is a minor, "Guardian" being an individual having legal custody and/or guardianship of the Volunteer) in favor of Habitat for Humanity International, Inc., a nonprofit corporation, and Habitat for Humanity of the Chesapeake, Inc., a Maryland nonprofit corporation, their directors, officers, employees and agents (collectively, "Habitat"). The Volunteer desires to work for Habitat and engage in the activities (the "Activities") related to being a volunteer. The Volunteer (and Guardian) understands that the Activities may include constructing and rehabilitating residential buildings, working in the Habitat offices and living in housing provided for volunteers of Habitat. The Volunteer (and Guardian) understands that this Release is valid for all occasions when the Volunteer is involved in activities related to Habitat for Humanity of the Chesapeake.

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

Release and Waiver. Volunteer (and Guardian) does 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 Activities with Habitat. Volunteer (and Guardian) understands 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 Activities with Habitat, whether caused by the negligence of Habitat or its officers, directors, employees, agents, or otherwise. Volunteer (and Guardian) also understands that 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. Volunteer (and Guardian on behalf of any minor Volunteer) assumes full responsibility for, and releases Habitat from and against any and all liability of any nature or sort arising out of or related to any, allergies and medical conditions Volunteer may have as well as ensuring that all vaccinations are current, including without limitation vaccination to prevent tetanus.

Medical Treatment. Volunteer (and Guardian) does hereby release and forever discharge Habitat from any claim whatsoever that arises or may hereafter on account of any first aid, treatment, or service rendered in connection with the Volunteer's Activities with Habitat or with the decision by any representative or agent of Habitat to exercise the power to consent to medical or dental treatment as such power may be granted and authorized in this release.

Assumption of Risk. Volunteer (and Guardian) understands that the Activities with Habitat include work that may be hazardous (that is, can cause serious physical injury or death) to the Volunteer, including, but not limited to, construction, loading and unloading and transportation to and from the work sites. Volunteer (and Guardian) hereby expressly and specifically assumes the risk of injury or harm in the Activities and releases Habitat from all liability including that for all injuries, illness, death, or property damage resulting from the Activities and/or Volunteer's negligence. Volunteer (and Guardian) also agrees to indemnify Habitat for any injury they cause another.

Insurance. Volunteer (and Guardian) understands 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. Each volunteer is expected and encouraged to obtain his or her own medical or health insurance coverage.

Lead Paint & Asbestos. Volunteer (and Guardian) understands that vacant houses built before 1970 may contain lead paint and/or asbestos. Lead paint and asbestos have been shown to cause severe health problems, especially in children under six years of age. Children and women who are pregnant, nursing, or planning to become pregnant should avoid exposure to lead paint and asbestos.

Photographic Release. Volunteer (and Guardian) does hereby grant and convey unto Habitat all right, title and interest in any and all photographic images and video or audio recordings made by Habitat during the Volunteer's Activities with Habitat, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

Other. Volunteer (and Guardian) expressly agrees 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) agrees that if there is any dispute with Habitat, it will be resolved by binding arbitration in the State of Maryland, based upon the rules of the American Arbitration Association and Maryland law. Volunteer (and Guardian) agrees 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 shall not otherwise affect the remaining provisions of this Release which shall continue to be enforced

Signature of Volunteer

Signature of Guardian



Volunteer Information

Name: _____

Birth Date: _____ Email: _____

Address: _____ City, State, Zip _____

Phone: _____ Home Work Cell

Volunteer Type

- Civic
 Company
 Education Inst.
 Medical Inst
 Military
 Faith-Based
 Social
 Youth

Have you volunteered with us before? Yes No

Have you served in the armed forces? Yes No

Would you like information on Women Build? Yes No

The information that you provide may be used to communicate our news and updates. Please check here to opt out of receiving communications from us.

Special Skills Info

Are there skills that you would be interested in volunteering?

- | | | | | | |
|---|--|-----------------------------------|--|--|--|
| <input type="checkbox"/> Community Outreach | <input type="checkbox"/> Education | <input type="checkbox"/> Clerical | <input type="checkbox"/> Data Entry | <input type="checkbox"/> Public Speaking | <input type="checkbox"/> Hospitality |
| <input type="checkbox"/> Public Relations | <input type="checkbox"/> Event Planning | <input type="checkbox"/> Writing | <input type="checkbox"/> Graphic Design | <input type="checkbox"/> Website Design | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Info Technology | <input type="checkbox"/> Accounting | <input type="checkbox"/> Media | <input type="checkbox"/> Videography | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Networking |
| <input type="checkbox"/> Coaching | <input type="checkbox"/> Customer Service | <input type="checkbox"/> Training | <input type="checkbox"/> Bilingual | <input type="checkbox"/> Merchandise | <input type="checkbox"/> Marketing |
| <input type="checkbox"/> Budgeting | <input type="checkbox"/> Furniture Restore | <input type="checkbox"/> Cleaning | <input type="checkbox"/> Electric Repair | <input type="checkbox"/> Woodworking | <input type="checkbox"/> Point of Sale |
- Do you have professional construction skills? Yes No

List your occupation, trade, license or other skills:

Emergency Contact Info

Your emergency contact **cannot** be someone who is serving with you on your volunteer day.

Name : _____

Phone: _____ Home Work Cell