PLEASE COMPLETE LEGIBLY



Poplar Grove 2014

P.O. Box 333, Longmont, CO 80502 303-682-2485

Volunteer Information Sheet

| Volunteer: (Please print): First Name: | |
|--|--|
| Address: Street Address: City: State: Zip Code: | |
| Phone: Home: Cell: | |
| E-mail: Required | |
| Date of Birth: Required | |
| Affiliation(s): | |
| Emergency Contact: Required First Name: | |
| Phone: | |
| Habitat for Humanity is supported by a grant by Thrivent Financial for Lutherans | |
| Are you Lutheran? Yes No | |
| Are you a member of Thrivent Financial? Yes No | |

Witness: Name: _

(PLEASE PRINT)



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Release and Waiver of Liability

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

| This Release and Waiver of Liab | ility (the "Release") is executed on this | | , 201 | 4, by | . 37 |
|--|--|---|--|--|-----------------------------------|
| | oitat for Humanity of the St. Vrain Valley respective directors, officers, trustees, en | | | tional, Inc., and ar | |
| I understand that my Activities operations; traveling to and from | as a volunteer for one or more of the Relea may include but are not limited to the fol a work sites, towns, cities or countries; con residential buildings; and other construct | lowing: work nsuming food | ing in Habitat for l l available or provi | Humanity offices or | r Habitat for Humanity ReStor |
| I, the Volunteer, hereby freely, v | oluntarily and without duress execute the | is Release un | der the following t | erms: | |
| from any and all liability, claims with respect to any bodily injury Activities with any of the Releas | lunteer, do hereby release and forever dis and demands which I or my heirs, assign , personal injury, illness, death or proper ed Parties, whether caused wholly or in p of the Released Parties or of other volun | ns, next of kin ty damage w part by the sin | n or legal represen hich arise or may b | tatives may have o vereafter arise from | r which may hereinafter accru |
| that the Released Parties do not | hat by this Release I knowingly assume t assume any responsibility for or obligation arance in the event of injury, illness, deat | on to provide | financial assistanc | | |
| $progress.\ It\ is\ further\ the\ policy\ c$ | nanity that children under the age of 16 a of Habitat for Humanity that, while minor on, demolition, working on rooftops and s | rs between the | e ages of 16 and 18 | $may\ be\ allowed\ to$ | participate in construction |
| | unteer, do hereby release and forever dis f any first aid, treatment or service rende | | | | |
| "Guardians") also hereby release the decision by any representati | ears of age, the Volunteer and the parent e and forever discharge the Released Part we or agent of the Released Parties to exe ental Authorization for Treatment of a M | ies from any rcise the pow | claim whatsoever | which arises or ma | y hereafter arise on account of |
| the following: construction; loads | e Volunteer, understand that my Activitie ng and unloading; travel to and from the o not wear protective equipment, am expe | work sites; a | and exposure to lea | d, asbestos, and mo | old, which may cause or worse |
| understand I may be traveling to | nherent risk in consuming local foods and and from locations where there is a risk on my health or safety. I also understand f hostages. | of terrorism, | war, insurrection, | criminal activities | s, inclement weather or other |
| | ly assume the risk of injury or harm in the property damage resulting directly or inc | | | eased Parties from | all liability for any loss, cost, |
| obligation to provide, carry or m | derstand that, except as otherwise agree aintain health, medical, travel, disability own health, medical, travel, disability or o | or other insu | ırance coverage for | 0. | |
| and all photographs and video or | Volunteer, do hereby grant and convey us audio recordings of or including my imagnot limited to, the right to use such photo | ge or voice, m | ade by any of the | Released Parties di | uring my Activities with the |
| Activities take place. I further as jurisdiction, the invalidity of suc | sly agree that this Release is intended to gree that in the event any clause or provis h clause or provision shall not otherwise r of a right under this Release does not pr | sion of this R affect the ren | elease shall be hele naining clauses or | d to be invalid by a provisions of this F | ny court of competent |
| To express my understanding of | and agreement with this Release, I sign l | here with a w | vitness. | | |
| Volunteer: Name: | Please wait to sign at the H | | Signature: | | |
| (PLEASE PRINT) | Please wait to sign at the H | labitat sii | t <mark>e in presence</mark> | of Habitat Pe | rsonnel witness. |

_Signature: __