PLEASE COMPLETE LEGIBLY



Poplar Grove 2015

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

Volunteer Information Sheet

Volunteer: (Please print): First Name:
Required Last Name:
Address: Street Address: Stree
Phone: Home: Cell:
E-mail: Caracter Control Caracter Caracter Control Caracter Control Caracter Control Caracter Control Caracter Caracte
Date of Birth: / / / / Required
Group or Affiliation(s): (Church, school, business, etc.)
Emergency Contact: Required
First Name:
Last Name:
Phone:
Habitat for Humanity is supported by a grant by Thrivent Financial, are you a member of Thrivent? Yes N

Witness: Name: _

(PLEASE PRINT)



P.O. Box 333, Longmont, CO 80502

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Release and Waiver of Liability

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

(PLEASE PRINT) Please wait to sign at the Habitat site in presence of Habitat Personnel witness.
(PLEASE PRINT)
Volunteer: Name: Signature:
To express my understanding of and agreement with this Release, I sign here with a witness.
Other. I, the Volunteer, expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the state where the Activities take place. I further agree that in the event 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 clauses or provisions of this Release, which shall cont be enforceable. Further, a waiver of a right under this Release does not prevent the exercise of any other right.
Photographic Release. I, the Volunteer, do hereby grant and convey unto Habitat for Humanity International, Inc., all right, title and interest in and all photographs and video or audio recordings of or including my image or voice, made by any of the Released Parties during my Activities with Released Parties, including, but not limited to, the right to use such photographs or recordings for any purpose and to any royalties, proceeds or other benefits derived from them.
Insurance. I, the Volunteer, understand that, except as otherwise agreed to by the Released Parties in writing, the Released Parties are under no obligation to provide, carry or maintain health, medical, travel, disability or other insurance coverage for any Volunteer. Each Volunteer is expected encouraged to obtain his or her own health, medical, travel, disability or other insurance coverage.
I hereby expressly and specifically assume the risk of injury or harm in the Activities and release the Released Parties from all liability for any loss expense, injury, illness, death or property damage resulting directly or indirectly from the Activities.
I also understand there is some inherent risk in consuming local foods and living in local accommodations in the city(ies) or country(ies) visited. I fu understand I may be traveling to and from locations where there is a risk of terrorism, war, insurrection, criminal activities, inclement weather or circumstances that could threaten my health or safety. I also understand that it is the policy of the Released Parties to not pay ransom or make any payments to secure the release of hostages.
Assumption of the Risk. I, the Volunteer, understand that my Activities may include work that may be hazardous to me, including, but not limit the following: construction; loading and unloading; travel to and from the work sites; and exposure to lead, asbestos, and mold, which may cause or certain illnesses, especially if I do not wear protective equipment, am exposed for extended periods of time, or have a pre-existing immune system deficiency.
If the Volunteer is less than 18 years of age, the Volunteer and the parents having legal custody and/or the legal guardians of the Volunteer (the "Guardians") also hereby release and forever discharge the Released Parties from any claim whatsoever which arises or may hereafter arise on according the decision by any representative or agent of the Released Parties to exercise the power to consent to medical or dental treatment as such power may granted and authorized in a Parental Authorization for Treatment of a Minor Child.
Medical Treatment. I, the Volunteer, do hereby release and forever discharge the Released Parties from any claim or action whatsoever which are may hereafter arise on account of any first aid, treatment or service rendered in connection with my Activities with any of the Released Parties.
It is the policy of Habitat for Humanity that children under the age of 16 are not allowed on Habitat for Humanity worksites while construction is in progress. It is further the policy of Habitat for Humanity that, while minors between the ages of 16 and 18 may be allowed to participate in construct work, using power tools, excavation, demolition, working on rooftops and similar activities are not permitted for anyone under the age of 18.
I understand and acknowledge that by this Release I knowingly assume the risk of injury, harm and loss associated with the Activities. I also under that the Released Parties do not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limmedical, health or disability insurance in the event of injury, illness, death or property damage.
Release and Waiver. I, the Volunteer, do hereby release and forever discharge and hold harmless the Released Parties and their successors and a from any and all liability, claims and demands which I or my heirs, assigns, next of kin or legal representatives may have or which may hereinafter with respect to any bodily injury, personal injury, illness, death or property damage which arise or may hereafter arise from or is in any way relate Activities with any of the Released Parties, whether caused wholly or in part by the simple negligence, fault or other misconduct, other than intentigrossly negligent conduct, of any of the Released Parties or of other volunteers.
I, the Volunteer, hereby freely, voluntarily and without duress execute this Release under the following terms:
I, the Volunteer, desire to work as a volunteer for one or more of the Released Parties and engage in the activities related to being a volunteer ("Act I understand that my Activities may include but are not limited to the following: working in Habitat for Humanity offices or Habitat for Humanity operations; traveling to and from work sites, towns, cities or countries; consuming food available or provided; living in housing provided for voluntee constructing and rehabilitating residential buildings; and other construction-related activities.
(the "Volunteer"), in favor of Habitat for Humanity of the St. Vrain Valley, Habitat for Humanity International, Inc., and any other Habitat for Humanitiated organization, and their respective directors, officers, trustees, employees, volunteers and agents (collectively, the "Released Parties").
This Release and Waiver of Liability (the "Release") is executed on this day of, 2015, by

Signature: __