

## Volunteer Release and Waiver of Liability Form

This release and Waiver of Liability (the “Release”) executed on \_\_\_\_\_ (date) by \_\_\_\_\_ (“Volunteer”) releases Christian Family Care, a nonprofit institution organized and existing under the laws of the State of Arizona, and each of its directors, officers, employees, and agents. The Volunteer desires to provide volunteer services for Christian Family Care, and engage in activities related to serving as a volunteer. Volunteer understands that the activities include, but are not limited to, light desk work (sitting or working in an office environment, climbing ladders/stairs, lifting, standing), operating a copy machine and/or a computer, ascending or descending stairs, lifting up to 30 lbs, event set up, working with kids, the community and/or participating in various community activities such as hiking, indoor or outdoor games, cooking, etc.

Volunteer understands that the scope of Volunteer’s relationship with Christian Family Care is limited to a volunteer position and that no compensation is expected in return for services provided by Volunteer; that Christian Family Care will not provide any benefits traditionally associated with employment to Volunteer; that Volunteer is responsible for his/her own insurance coverage in the event of personal injury or illness as a result of Volunteer’s services to Christian Family Care; and that Volunteer is responsible for ensuring his/her own homeowners and auto insurance policies cover guests and visitors in the event of injury to others.

Volunteer hereby freely, voluntarily, and without duress executes this Release under the following terms:

1. Waiver and Release: In consideration of the opportunity to participate as a volunteer, I, the Volunteer, release and forever discharge and hold harmless Christian Family Care and its directors, officers, employees, agents, successors, and assigns from any and all liability, claims, and demands of whatever kind of nature, either in law or in equity, which arise or may hereafter arise from the services I provide to Christian Family Care. I understand and acknowledge that this Release discharges Christian Family Care from any liability or claim that I may have against Christian Family Care with respect to bodily injury, personal injury, illness, death, or property damage — including damage caused or alleged to be caused in whole or in part by the negligence of Christian Family Care or otherwise — that may result from the services I provide to Christian Family Care or occurring while I am providing volunteer services.
2. No Responsibility or Obligation to Provide Assistance: Further I understand that Christian Family Care does not assume any responsibility for or obligation to provide me with financial or other assistance, including but not limited to medical, health, auto, homeowners, or disability benefits or insurance. I expressly waive any such claim for compensation or liability on the part of Christian Family Care.
3. Medical Treatment: I hereby Release and forever discharge Christian Family Care 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 related to my service as a volunteer with Christian Family Care.
4. Assumption of Risk: I understand that the services I provide to Christian Family Care may include activities that may be hazardous to me, including but not limited to light desk work (sitting or standing), operating a copy machine and/or a computer, ascending or descending stairs, lifting up to 30 lbs., and/or participating in various community

activities such as hiking, indoor or outdoor games, cooking, etc. As a volunteer, I hereby expressly assume risk of injury or harm from these activities and release Christian Family Care from all liability.

5. Insurance: I understand that Christian Family Care is currently a policyholder of a Blanket Accident Insurance Policy that may pay benefits for specific losses that result from covered events. More information regarding this policy is available from Christian Family Care upon request. Nothing in this Release is intended to require or obligate Christian Family Care to obtain or maintain accident insurance for volunteers.
6. Photographic Release: I grant and convey unto Christian Family Care all rights, title, and interest in any and all photographic images and video or audio record made by Christian Family Care during my work for Christian Family Care, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings. I release Christian Family Care from liability associated with the use, distribution, or reproduction of my images.
7. Other: As a volunteer, I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Arizona that this Release shall be governed by and interpreted in accordance with the laws of the State of Arizona. I agree that in the event that any clause or provision of this Release is deemed invalid, the enforceability of the remaining provisions of this Release shall not be affected.

By signing below, I express my understanding and intent to enter into this Release and Waiver of Liability willingly and voluntarily.

\_\_\_\_\_  
Signature (Or parent/guardian if under 18)

Date: \_\_\_\_\_

*Please note: If your volunteer role includes mentoring or caring for a young person(s), we ask that each member of your household who will spend time with the young person(s) individually sign this Volunteer Release and Waiver of Liability form.*