

Coastal Habitat for Humanity Volunteer Release and Waiver of Liability

This Release and Waiver of Liability (the "Release"), executed on this ____ day of _____, 20____, by _____ (the "Volunteer") in favor of **Coastal Habitat for Humanity**, a nonprofit corporation ("Habitat"), its directors, officers, employees, and agents.

The Volunteer desires to participate and work in Habitat's home building program, and the activities related to the Work. The Volunteer does hereby freely, voluntarily, and without duress execute this Release under the following terms:

1. Waiver and Release. Volunteer 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 participation in Habitat's home building program.

Volunteer understands that this Release discharges Habitat from any liability or claim that the Volunteer may have against Habitat with respect of any bodily injury, personal injury, illness, death, or property damage that may result from Volunteer's participation in Habitat's home building program. Volunteer 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.

2. Medical Treatment. Volunteer does hereby release and forever discharge Habitat from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the Volunteer's participation in Habitat's home building program.

3. Assumption of the Risk. The Volunteer understands that Habitat's program may include activities that may be hazardous to the Volunteer and that food, accommodations, and medical facilities may be donated to Habitat and beyond the control of Habitat. Volunteer hereby expressly and specifically assumes the risk of injury or harm in these activities and releases Habitat from all liability for injury, illness, death, or property damage resulting from the activities of the Volunteer's participation in Habitat's home building program.

4. Insurance. The Volunteer understands that Habitat does not carry or maintain health, medical, or disability insurance coverage on any Volunteer. Each Volunteer is expected and encouraged to arrive with medical and health insurance coverage in effect.

5. Photographic Release. Volunteer does hereby grant and convey unto Habitat all right, title, and interest in any and all photographic images and video or audio recording made by Habitat during Habitat's home building program, including but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

6. Other. Volunteer expressly agrees that the Release is intended to be as broad and inclusive as permitted by the laws of the State of New Jersey, and that this Release shall be governed by and interpreted in accordance with the laws of this state. Volunteer agrees that in the event that any clause or provision of this Release shall be held to be invalid by any court or competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provision of this Release which shall continue to be enforceable.

IN THE WITNESS WHEREOF, Volunteer has executed this Release as of the day and year first above written.

***Please print clearly**

Witness: _____

Address: _____

Parent/Guardian name if under 18 years of age: _____

Phone: _____

Parent/Guardian Signature: _____

Email: _____
Volunteer Signature: _____

Medical Emergency Information: Coastal Habitat for Humanity

NAME: _____ Phone: _____

Address: _____

E-mail address: _____

Emergency contact: _____ **Phone:** _____

Address: _____

Relationship to you: _____

Health Insurance Coverage: _____

Company: _____ ID# _____

Personal Physician: _____ Phone: _____

Allergies? _____ List: _____

Medications: _____ Date of last tetanus Shot: _____

Physical impairments: _____

Other info: _____