



VOLUNTEER RELEASE FORM

Date: _____ Location: _____

Please fill out the form below and indicate your interests on the back of this form.

PLEASE PRINT LEGIBLY

Name: _____ Retired: Yes ___ No ___

Address: _____ City: _____

State: _____ Zip: _____ Email: _____

Phone: _____

Employer: _____ Occupation: _____

Clubs & Organizational Affiliations: _____

Church/Faith Affiliation: _____

VOLUNTEER LIABILITY RELEASE STATEMENT

I hereby release Habitat for Humanity of Mahoning Valley (HFHMV) and any of its affiliates or associations, including any of its agents, employees, directors, officers, or workers, from any and all claims, demands, suits, or causes of action against it which I have or may have in the future with regard to any and all accidents, injuries or damages to me or my property arising from the work performed on HFHMV projects (including the ReStores).

I understand that I am a volunteer working on/in this project/ReStore and as such waive all rights to claims, demands, suits, or causes of action for injury or damage sustained thereto. I do not have any medical or physical limitations which would restrict the work I can do on a HFHMV construction project or in a ReStore.

I further represent that I have medical insurance on my own with _____ which will cover any and all injuries or medical conditions which must be treated in connection with any and all accidents related to working as a volunteer on a HFHMV project on in a ReStore.

I further AGREE ___ / DO NOT AGREE ___ to allow any photos taken of me at HFHMV events to be used for HFHMV purposes.

I further state that I have heard HFHMV safety procedures as well as received them in written form for my personal reference.

I further state that I have carefully read the following release and know the contents thereof and sign as my own free act.

Please PRINT your name legibly

Please SIGN your name

Date