VOLUNTEER LIABILITY WAIVER

I, the undersigned volunteer, understand and acknowledge that I am voluntarily participating in

activities organized by PeaceProtectionProject (PPP), a nonprofit organization.

I agree to the following terms:

- I accept full responsibility for any risk of injury, illness, death, or property damage arising from my participation.

- I release and hold harmless PeaceProtectionProject, its officers, agents, employees, volunteers,

and partners from any liability resulting from my participation in PPP events or activities.

- I understand that my participation is voluntary, and I may withdraw at any time.

By signing below, I confirm that I have read and agree to the terms of this Liability Waiver.

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Emergency Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_