ADULT VOLUNTEER RELEASE AND WAIVER OF LIABILITY FORM

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

Thi	s Release and Waiver of Liability (the "F	Release") executed on t	his da	y of	, 20	on behalf o	of -
	, (the "Volunteer"). T						
	poration, each of its directors, officers, em	_	IdWS OF LIFE	e Officed States as a Se	ction sor(c)	(4) tax exemp	
cor ass par	he above named Volunteer, do hereby aderstands that the scope of the Volunte mpensation is expected in return for service ociated with employment to Volunteer. The ticipating in the Nonprofit's activities as a purance coverage in the event of personal in	eer's relationship with es provided by Volunteer; The Volunteer desires th player, participant or volu	Nonprofit is and that No at the Volu unteer. The	s limited to a volunte enprofit will not provide enteer engage in activit Volunteer is responsible	er position a any benefits ties related to e for the Volu	and that no traditionally or	
1.	Waiver and Release: I release and forever disciplination of whatever kind or nature, either Nonprofit, including claims arising out of neglical that I may have against Nonprofit with reservices the Volunteer provides to Nonprofit of	er in law or in equity, which igence. I understand and ac espect to bodily injury, perso	arise or may knowledge th onal injury, ill	hereafter arise from the a nat this Release Discharge ness, death, or property da	ctivities as a Vo s Nonprofit fro	lunteer with the m any liability o	e or
2.	. <u>Insurance</u> : I affirm that I am covered by primary medical insurance and understand that I am responsible for my medical bills if injury occurs Further, I understand that Nonprofit does not assume any responsibility for or obligation to provide the Volunteer with financial or othe assistance, including but not limited to medical, health or disability benefits or insurance of any nature in the event of the Volunteer's injury illness, death or damage to his or her property. I expressly waive any such claim for compensation or liability on the part of Nonprofit beyond what may be offered freely by Nonprofit in the event of such injury or medical expenses incurred by the Volunteer.						
3.	Assumption of Risk: I understand that the services provided by me to Nonprofit may include activities that are inherently dangerous to me, including but not limited to I hereby expressly assume the risk of injury or harm to me from these activities and Release Nonprofit from all liability for injury, illness, death, or property damage resulting from the services I provide as a volunteer or occurring while I am participating in events.						
4.	<u>Photographic Release</u> : I, grant and convey to Nonprofit all right, title, and interests in any and all photographs, images, video or audio recordings of the Volunteer or his or her likeness or voice made by Nonprofit in connection with the Volunteer participating in Nonprofit events, including but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.						
5.	Medical Treatment: I, hereby release and forever discharge Nonprofit 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 during my tenure as a volunteer with Nonprofit. give my consent for the Nonprofit to provide, administer, or obtain medical treatment for me.						
6.	Other: I, expressly agree that this Release is in this Release shall be governed by and interpr clause or provision of this Release is deemed	eted in accordance with th	e laws of the	State of I	agree that in t	he event that a	
-	signing below, I, the above named Voluita		derstandin	g and intent to enter	into this Rel	ease and	
					OPTI	MIST	
Sig	nature	Date					
 Pri	nt Name	_					