



VOLUNTEER RELEASE AND WAIVER OF LIABILITY

PLEASE READ CAREFULLY! THIS DOCUMENT AFFECTS YOUR LEGAL RIGHTS!

THIS RELEASE AND WAIVER OF LIABILITY (the "Release") is given on this ____ day of _____, 20____, by _____ ("Volunteer") in favor of Rebuilding Together, Platte Valley East, Inc., a Nebraska corporation ("Rebuilding Together"), and its directors, officers, employees and agents, and the heirs, executors, personal representatives, successors and assigns of each of them ("Rebuilding Together Parties").

Volunteer desires to work as a volunteer on a Rebuilding Together project located in _____ ("Project") and to engage in the other activities related to being a volunteer. Volunteer understands that these activities may include repairing and rehabilitating homes and other residential buildings, including shelters and group homes.

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

1. Waiver and Release. Volunteer does hereby release and forever discharge and hold harmless each of the Rebuilding Together Parties 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 activities with respect to the Project and does covenant not to sue any of the Rebuilding Together Parties with respect to such matters.

Without limiting the generality of the foregoing, Volunteer understands and agrees that this Release discharges each of the Rebuilding Together Parties from any liability or claim that Volunteer may have against any of them with respect to any bodily injury, personal injury, illness, death or property damage that may result from Volunteer's activities with respect to the Project, whether caused by the negligence of a Rebuilding Together Party or otherwise. Volunteer also understands and agrees that Rebuilding Together does not assume any responsibility for or obligation to provide financial assistance or any other assistance in the event of injury or illness.

2. Medical Treatment. Volunteer does hereby release and forever discharge the Rebuilding Together Parties from any claim whatsoever which arises on account of any first aid, treatment or service rendered in connection with the Volunteer's work on the Project.

3. Assumption of the Risk. Volunteer understands that the work on the Project may include activities that may be hazardous to the Volunteer, including, but not limited to, construction and repair, painting, moving furniture and appliances, loading and unloading construction supplies and equipment, trash removal, use of tools and equipment and transportation to and from work

sites. Volunteer hereby expressly and specifically assumes the risk of injury or harm in these activities, whether caused by the negligence of a Rebuilding Together Party or otherwise.

4. Insurance. Volunteer understands that Rebuilding Together does not carry or maintain health, medical or disability insurance coverage for any Volunteer. **Each Volunteer is strongly encouraged to have adequate medical or health insurance coverage in effect.**

5. Media/Photographic Release. Volunteer does hereby grant and convey unto Rebuilding Together all rights, title and interest in any and all photographic images and video or audio recordings made by Rebuilding Together during the Volunteer's activities with respect to the Project, including, but not limited to, any royalties, proceeds or other benefits derived from such photographs or recordings.

6. Other. Volunteer expressly agrees that this Release is intended to be as, but only as, broad and inclusive as permitted by the laws of the State of Nebraska. Volunteer agrees that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release, all of which shall continue to be enforceable.

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

Witness Signature: _____ Date: _____

Witness Printed Name: _____

Volunteer Signature: _____ Date: _____

Volunteer Printed Name: _____

Address: _____

Primary Phone: _____ Mobile Phone: _____

Email Address: _____

Emergency Contact Name: _____

Emergency Contact Primary Phone Number: _____

Emergency Contact Relationship: _____

