

Release and Waiver of Liability

This Release and Waiver of Liability (the "Release") is executed on this month, day and year ____/____/____ by _____ (the "Volunteer") in favor of Holy Manna Ministries., a nonprofit corporation, their directors, officers, employees, funders, volunteers, and agents.

The Volunteer desires to work as a volunteer for Holy Manna Ministries and engage in the activities related to being a volunteer (the "Activities"). The Volunteer hereby freely, voluntarily, and without duress executes this Release under the following terms:

Release and Waiver. Volunteer does hereby release and forever discharge and hold harmless Holy Manna Ministries. and their 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 Activities with Holy Manna Ministries.

Volunteer understands that this Release discharges Holy Manna Ministries from any liability or claim that the Volunteer may have against Holy Manna Ministries with respect to any bodily injury, personal injury, illness, death, or property damage that may result from Volunteer's Activities with Holy Manna Ministries., except where directly caused by the gross negligence of Holy Manna Ministries or its officers, directors, employees, or agents or otherwise. Volunteer also understands that Holy Manna Ministries 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 in the event of injury or illness.

Medical Treatment. Volunteer does hereby release and forever discharge Holy Manna Ministries. 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 Activities with Holy Manna Ministries.

Assumption of the Risk. The Volunteer understands that the Activities include work that may be hazardous to the Volunteer, including, but not limited to, construction, loading and unloading, and transportation to and from the work sites.

Volunteer hereby expressly and specifically assumes the risk of injury or harm in the Activities and releases Holy Manna Ministries. from all liability for injury, illness, death, or property damage resulting from the Activities.

Insurance. The Volunteer understands that, except as otherwise agreed to in writing, Holy Manna Ministries. does not carry or maintain health, medical, or disability insurance coverage for any Volunteer. Each Volunteer is expected and encouraged to obtain his or her own medical or health insurance coverage.

Photographic Release. Volunteer does hereby grant and convey unto Holy Manna Ministries. all right, title, and interest in any and all photographic images and video or audio recordings made by Holy Manna Ministries. during the Volunteer's Activities with Holy Manna Ministries., including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

Sexual Harassment. Holy Manna Ministries intends to provide a volunteer environment that is pleasant, healthful, comfortable and free from intimidation, hostility or other offenses which might interfere with volunteer and staff performance. Sexual harassment is unlawful verbal or physical conduct of a sexual nature. It violates both federal and state anti-discrimination laws. Volunteers who believe they have been subject to sexual harassment are urged to report it to the Volunteer Coordinator or another staff member.

Child Abuse Notification. I have received information about my obligation to report suspected child abuse to the appropriate Holy Manna Ministries staff person in a timely manner (with the knowledge that Holy Manna Ministries staff will report to the proper authorities). I will provide Holy Manna Ministries staff with a written statement at the time.

Confidentiality. Volunteer agrees to treat the identity and all information about clients, as well as other identifying information about the shelter, transitional houses, or any other services as confidential. Clients' names will not be mentioned outside the structure of our programs. Cases will not be discussed with any person other than a Holy Manna Ministries staff member, unless specifically authorized by the client. I certify on behalf of the minor child that I have an understanding of Sexual Ethics and Sexual Harassment

Other. Volunteer expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Georgia, and that this Release shall be governed by and interpreted in accordance with the laws of the State of Georgia. 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 which shall continue to be enforceable.

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

PLEASE PRINT LEGIBLY AND ENTER ALL REQUESTED INFORMATION.

If you need documentation of your volunteer hours, please bring any and all forms to be signed with you to the project site and have the Holy Manna Ministries representative on site sign them at the beginning and at the end of the day.

Volunteer Name _____

Volunteer Signature _____

Witness _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Email _____

Emergency Contact _____ Phone _____

Many companies match volunteer hours with cash donations to local non-profit organizations. Please check with your employer for more information on your company's community giving initiatives.