

Joplin Tornado May 2011

VOLUNTEER RELEASE AND WAIVER OF LIABILITY

AmeriCorps St. Louis Emergency Response Team, Individual, and Group Volunteers

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

This Release and Waiver of Liability, executed on (date) _____, by (volunteer's name) _____, in favor of AmeriCorps St. Louis, Jasper/Newton County, Joplin City, Grace Baptist Church, and their partner organizations, directors, officers, members and affiliates (herein referred to as "Storm Recovery Task Force").

I, the volunteer, desire to work as a volunteer for Americorps St Louis and engage in activities, as coordinated by Americorps St Louis, related to being a volunteer. I understand that such activities may include, but not limited to, tree and debris, application of tarps, distribution of goods, EMT and other medical work, work around chainsaws and other power equipment, etc. I freely and voluntarily execute this Release under the following terms.

1. **RELEASE AND WAIVER.** I hereby release and forever discharge Americorps St Louis from any and all liability, claims and demands of whatever kind either in law or in equity, which arise or may hereafter arise from my activities with Americorps St Louis. I understand that this Release discharges Americorps St Louis from any liability or claim that I may have against Americorps St Louis with respect to bodily injury, personal injury or property damages that may result from my activities with Americorps St Louis. I also understand that Americorps St Louis does not assume any responsibility for or obligation to provide financial or other assistance, including but not limited to medical, health, auto or disability insurance in the event of injury or loss.

2. **MEDICAL TREATMENT.** I hereby release and forever discharge Americorps St Louis from any claim which arises or may arise on account of first aid, treatment or any service rendered in connection with my volunteer activities with Americorps St Louis.

3. **ASSUMPTION OF RISK.** I understand that my volunteer activities may include work that is hazardous, including but not limited to work around power tools, heavy machinery, as well as transportation to and from the work site. I hereby expressly assume the risk of injury or harm in the volunteer activities.

4. **INSURANCE.** I understand that Americorps St Louis does not carry or provide health, medical, disability or auto insurance coverage for any emergent volunteer. Each volunteer is expected and encouraged to obtain his or her own medical, health, disability and auto insurance.

5. **PHOTOGRAPHIC RELEASE.** I hereby grant unto Americorps St Louis all rights to any and all photographic and video images made during my service to Americorps St Louis for internal use or reasons of publicity.

6. **OTHER.** I agree that this Release and Waiver is intended to be as broad and inclusive as permitted by local and state laws. I agree that in the event that any provision of this release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such provision shall not otherwise affect the remainder of the Release and Waiver, which shall continue to be held enforceable.

Volunteer signature: _____ Date: _____

Parent or guardian signature: _____ Date: _____
(for volunteers under the age of 18)

Drivers License # _____

Organization: _____

Emergency Contact Information

Contact person: _____

Relationship to volunteer: _____

Contact phone number: _____ Secondary number: _____

Collected by: _____ on ____/____/____ at ____ am/pm