## **Volunteer Information Form/ Release and Waiver of Liability**



\*\*Parent/guardian must also sign if volunteer under the age of 18

Please print all the information.

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Volunteer Name:		Birthdate:/
Phone Home:	Cell/Mobile:	Work:
Email:		
Address:	City:	State: ZIP:
In case of emergency, please contact:		
Name:		Relationship:
Phone Home:	Cell/Mobile:	Work:
PLEASE READ CAREFULLY! THIS IS A LEGAL DOCUMENT THAT AFFECTS YOUR LEGAL RIGHTS!		
International, Inc., a nonprofit corporation, Greate "Habitat"). The Volunteer desires to work as a that the Activities may include constructing and replaced in the Activities may include constructing and replaced in the Activities may include constructing and replaced in the Activities and the Activities unsafe, I will immediately discontinue further paraly suffer or cause while participating in any of willing to assume the risk of any medical or participating in any of willing to assume the risk of any medical or participating in any of willing to assume the risk of any medical or participating in any of willing to assume the risk of any medical or participating in any of willing to assume the risk of any medical or participating in any of willing to assume the risk of any medical or participating in any of willing to assume the risk of any medical or participating in any of willing the actions or in the "RELEASEES" NAMED BELOW OR THE "Activities to a result of my participation or that administrators, directors, officers, employees, a premises on which the Activities take place, and the LIABILITY, CLAIMS, DEMANDS, LOSSES, OR NEGLIGENCE OF THE "RELEASEES" OR T despite signing this release I, or anyone on my THE "RELEASEES" from any litigation expense, Assumption of the Risk. The Volunteer unconstruction, loading and unloading, and transpowers that, if at any time, he is in or about a	er Des Moines Habitat for Humanity, Inc., an I volunteer for Habitat and engage in the active enovating residential buildings, working in the IT that I understand the nature of the Activities that I see fit, of my own choosing and volunticipation in the Activities. I CERTIFY THAT the Activities offered at Habitat. I agree to be hysical condition I may have. I FULLY UNCLUDING PERMANENT DISABILITY, PARA nactions of others participating in the Activitien NEGLIGENCE OF THIRD PARTIES; (c) there of the minor in the Activities. I HEREBY in the participating in the Activities in the participating in the Activities in the participating in the Activities. I HEREBY in the minor in the Activities. I HEREBY in the participating in the Activities in the participating in the Activities of the minor in the Activities. I HEREBY in the participating in the Activities of the minor in the Activities. I HEREBY in the participating in the Activities of the minor in the Activities in the participating in the Activities of the minor in the Activities may include work site and he feels anything to be unsafiate further in Activities. Lead Paint & Asbe	work that may be hazardous to the Volunteer, including, but not limited to be agrees to inspect the work sites which he enters, and he further agrees and fe, he will immediately advise a Habitat representative of such and if necessarestos. Volunteer understands that houses built before 1978 may contain learness.
		IBILITY FOR THE RISK OF BODILY INJURY, HARM, OR DEATH IN THI EATH, OR PROPERTY DAMAGE ARISING OUT OF OR RESULTING FROI
Photographic and other recordings. Volunteer does hereby grant and convey unto Habitat all right, title, and interest in any and all photographic images and video audio recordings made by Habitat during the Volunteer's Activities with Habitat, including, but not limited to, any royalties, proceeds, or other benefits derived from suphotographs or recordings.		
Text messaging. Volunteer does hereby grant and convey to Habitat the ability to communicate with them through text message to deliver volunteer schedule upovolunteer alerts and custom messages. Volunteer has the ability to opt-out of the text messages at any time. Standard text message rates apply.		
<b>Other</b> . Volunteer expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of lowa, and that this Release shall be governed by and interpreted in accordance with the laws of the State of lowa. Volunteer agrees that in the event that any clause or provision of this Release shall be held 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 execute	d this Release as of the day and year first ab	ove written.
Signature:	Date:	Parent/guardian Signature: