



Volunteer Liability Waiver

Release and Acknowledgement of Risk & Approval of Photo Publication

Name of Volunteer (please print): _____

Address: _____

City: _____ Zip: _____

Phone: _____

Email: _____

This document must be signed by all volunteers. If the volunteer is under the age of 18, this document must be signed by their legal guardian. This document covers and is binding for any and all Cheboygan Conservation District (CCD) events throughout the year.

Volunteer Activity: I am donating my time and services without any compensation and shall at no time be considered an employee or independent contractor of the CCD's programs, projects or events. I understand that the CCD is not providing insurance coverage for me.

Release from Liability: In consideration for being allowed to participate as a volunteer, I, binding my heirs, executors, administrators, and assigns, hereby fully and forever release, waive, discharge the CCD and any organizer of any event in which I am participating, all sponsors, volunteers and affiliates, from any and all claims, actions, causes of action, remedies and complaints of any kind, except for claims for gross negligence or willful misconduct, which I have or may have, whether known or unknown, arising out of or relating to the program, project and/or event or my volunteer work for the event, including specifically all claims for personal injury, wrongful death, property damage and any other injury or loss, I may sustain.

Assumption of Risk: I assume all risks of participating in CCD's programs, projects and/or events and take full responsibility for my conduct and actions, including any injury to myself or others or damage to property that may result while volunteering. I am aware that some activities may be hazardous, involving risk of serious bodily injury, death, or property damage. I am voluntarily participating in these activities with knowledge of the risks.

Photo Publications: I hereby grant the CCD permission to use any photo of me at and during any program, project and/or event, in any and all of its publications, including website entries, brochures, press releases, Facebook posts, and other social media without payment or any other consideration.

My signature below affirms that I have read and understood the above document and that I voluntarily, freely and without duress agree to its terms:

Volunteer:

Sign: _____

Print: _____

Date: _____

Legal Parent/Guardian:

Sign: _____

Print: _____

Date: _____

EMERGENCY INFORMATION: In case of emergency, please call:

Name: _____

Phone: _____

Allergies: _____