

**Sussex County Habitat for Humanity  
Release and Waiver of Liability  
(18 and over)**

**Name:** \_\_\_\_\_

**Birth Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Phone: Home** \_\_\_\_\_

**Cell** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_

**Relationship:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Are you donating hours to a current Partner Family?**    **Yes**    **No**

**If Yes, Name of Current Partner Family:** \_\_\_\_\_

**Are You with a Group?**    **Yes**    **No**

**If Yes, Name of Group:** \_\_\_\_\_

**Date of Last Tetanus Shot:** \_\_\_\_\_

I release, and hold harmless your organization and the sponsors of the volunteer site from any and all liability claims, and causes of action, of whatever kind or nature (including any injury caused by negligence) incurred in conjunction with the volunteer service.

I certify that I have read and fully understand the Safety Guidelines provided by Sussex County Habitat for Humanity. I agree to abide by these guidelines.

In addition, Habitat for Humanity has my permission to use any photographs or videos taken for publicity purposes.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_