

ASSUMPTION OF RISK, RELEASE FROM LIABILITY AND AGREEMENT

PLEASE PRINT CLEARLY

Last Nar	me:	First Name	First Name:					
Spouse:			New Volunteer	YES	NO			
Street A	Address:		New Address	YES	NO			
City, Sta	ate, Zip:							
Home P	hone:	E-Mail:						
Date of	Birth:							
In case o	of emergency, please contact:							
	NAME:							
	RELATION:							
The follo	PHONE: (home) wing information is not required for p ng access to the Volunteer/Participant	participation but is requested as it ma			or medica			
The follo not havir	wing information is not required for p ng access to the Volunteer/Participant Allergies (Medicine, food, etc):	participation but is requested as it ma t's medical history:	ay be needed by any h		or medica			
The follo not havir	wing information is not required for p ng access to the Volunteer/Participant Allergies (Medicine, food, etc): Medications being taken:	participation but is requested as it ma t's medical history:	ay be needed by any h		or medica			
The follo not havir	wing information is not required for p ng access to the Volunteer/Participant Allergies (Medicine, food, etc):	participation but is requested as it ma t's medical history:	ay be needed by any h		or medica			
The follo not havir	wing information is not required for p ng access to the Volunteer/Participant Allergies (Medicine, food, etc): Medications being taken: Date of last tetanus shot:	participation but is requested as it ma t's medical history:	ay be needed by any h		or medica			
The follo not havir	wing information is not required for p ng access to the Volunteer/Participant Allergies (Medicine, food, etc): Medications being taken: Date of last tetanus shot: Physical impairments:	participation but is requested as it ma t's medical history:	ay be needed by any h	ospital (

- 1. I acknowledge that I have voluntarily applied to Habitat for Humanity of Ventura County ("Habitat for Humanity") to participate in construction and other activities at various locations in Ventura County.
- 2. As consideration for being permitted by Habitat for Humanity to participate in these activities, enter its worksites and use its tools, equipment and other facilities, I hereby agree that I, my assignees, my heirs, distributes, guardians, legal representatives will not make a claim against, sue, or encumber or attach any property of Habitat of Humanity or its employees, agents, board members or officers, or the suppliers of any of the tools or equipment I will use in these activities, for injury or damage resulting from any and all causes whatsoever, including but not limited to, negligence or other acts of any participant in any Habitat for Humanity activity in which I am a participant.
- 3. I hereby release Habitat for Humanity based in any manner on my participation in any Habitat activity, I agree to indemnify Habitat for Humanity and its employees, agents, board members, and officers, from all actions, claims, and demands that now have or may hereafter have for injury or damage resulting from my participation in activities sponsored in whole or part by Habitat for Humanity.
- 4. I understand that Habitat for Humanity does not carry or maintain health or disability insurance coverage for any volunteer. EACH VOLUNTEER IS EXPECTED AND ENCOURAGED TO ARRIVE WITH HEALTH INSURANCE COVERAGE IN EFFECT.
- 5. I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of California, and that this Release shall be governed by and interpreted in accordance with the laws of the State of California. I agree that if any clause or provision is ruled invalid by any

court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release shall continue to be enforceable.

- 6. I AM AWARE THAT CONSTRUCTION IS A HAZARDOUS ACTIVITY. I AM VOLUNTARILY PARTICIPATING IN THE ACTIVITIES OF CONSTRUCTION WITH THE KNOWLEDGE OF THE DANGER INVOLVED AND WITH THE KNOWLEDGE THAT MEDICAL FACILITIES MAY NOT BE AVAILABLE IN THE EVENT OF INJURY TO ME. I HEREBY AGREE TO ACCEPT ANY AND ALL RISKS OF INJURY AND DEATH, AND VERIFY THIS STATEMENT BY PLACING MY INITIALS HERE:
- 7. If there is any violation of this agreement and Habitat for Humanity is sued, or a claim is made against Habitat for Humanity **based in any manner on my participation in any Habitat activity**. I agree to indemnify and hold harmless from any and all expenses and liability. Such indemnity shall cover all reasonable expenses incurred by them, including but not limited to attorney fees.

AUTHORIZATION AND RELEASE

I hereby grant to HABITAT FOR HUMANITY OF VENTURA COUNTY (HfHVC), its legal representatives, successors and assigns, irrevocable permission to take and to copyright, in its own name or otherwise, and re-use, publish and republish photographic portraits, pictures or similar images or likenesses (collectively, the "Pictures") of me and my children and/or other minors for which I am legally responsible, including, without limitation, any other Pictures in which I or they may be included, in whole or in part, composite or distorted in character or form, without restriction as to changes or alterations, in conjunction with my own or fictitious name(s), or reproductions thereof in color or otherwise, made through any medium, and in any and all media now or hereafter known for illustration, promotion, art, editorial, advertising, trade, and any other purpose whatsoever. I also consent to the use of any published matter in connection therewith. The Pictures may be published in any manner, including advertising, periodicals, trade show exhibits and other promotional applications. Furthermore, I will hold harmless HfHVC, its representatives, successors and assigns, from any liability arising from or in connection with the aforementioned Pictures.

I agree that I have read and understand Habitat's Terms of Participation as set forth on the website for Habitat for Humanity at <u>www.habitatventura.org</u> and agree to abide by those terms. I further understand and agree that Habitat is permitted to and may run a criminal background check as a condition of my participation, including on federal and state sex offender databases.

I affirm that I am more than 18 years of age and that I am competent to sign this contract on my own behalf. I acknowledge that I have read the foregoing authorization and release and that I fully understand its contents.

(Please Print Name) I HAVE CAREFULLY READ THIS ASSUMPTION OF RISK, RELEASE OF LIABILITY, AND RELEASE AGREEMENT AND I FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN ME AND HABITAT FOR HUMANITY OF VENTURA COUNTY. I AM SIGNING THIS DOCUMENT OF MY OWN FREE WILL.

Execut [®]	ed at:						_, <mark>Califo</mark>	ornia, o	n:					
			<mark>(Constr</mark>	ruction S	<mark>ite)</mark>						<mark>(Date)</mark>			
Date of	<mark>f Birth:</mark>													
										<mark>(Volunte</mark>	eer's Sig	<mark>mature)</mark>		
*	*	*	*	*	*	*	*	*	*	*	*	*	*	,

Habitat volunteers must be 16 years of age or older when the construction site is utilizing power tools/equipment. Parental signature is mandatory for volunteers under 18 years old.

Please list the names and ages of any minor wishing to volunteer with Habitat for Humanity of Ventura County.

Minor Name	Age	Minor Name	Age
Minor Name	Age	Minor Name	Age
Minor Name	Age	Minor Name	Age

(Parent/Legal Guardian's Name- PLEASE PRINT)

____)___

(Phone Number)

(Parent/Legal Guardian's Name- PLEASE PRINT)

(Parent/Legal Guardian's Signature)

(Parent/Legal Guardian's Signature)

____)____ (Phone Number)