

EMERGENCY MEDICAL FORM

PLEASE PRINT!

VOLUNTEER NAME: _____

IN CASE OF EMERGENCY PLEASE CONTACT:

Name: _____ Relation: _____

Address: _____ City/Zip: _____

Home Phone: _____ Work Phone: _____

THE FOLLOWING INFORMATION MAY BE NEEDED BY ANY HOSPITAL OR MEDICAL PRACTITIONER NOT HAVING ACCESS TO THE VOLUNTEER/PARTICIPANTS MEDICAL HISTORY:

Allergies (Medicine, Food, Etc.): _____

Medications being taken: _____

Date of last tetanus shot: _____

Physical impairments: _____

Other: _____

PERSONAL PHYSICIAN:

Name: _____

Address: _____ City/Zip: _____

Phone: _____

HEALTH INSURANCE COVERAGE:

Company: _____ Policy # _____

Insurance Agent: _____

RELEASE AND WAIVER OF LIABILITY

ASSUMPTION OF RISK, RELEASE FOR LIABILITY AND AGREEMENT FOR HABITAT FOR HUMANITY OF GREATER LOS ANGELES WORK PROJECTS

I acknowledge that I have voluntarily applied to Habitat for Humanity of Greater Los Angeles to participate in construction and other activities at locations in the State of California.

I AM AWARE THAT CONSTRUCTION AND WORKING IN THE HOME IMPROVEMENT STORE ARE HAZARDOUS ACTIVITIES. I AM VOLUNTARILY PARTICIPATING IN THE ACTIVITIES OF CONSTRUCTION AND/OR WORKING IN THE HOME IMPROVEMENT STORE WITH THE KNOWLEDGE OF THE DANGER INVOLVED. I HEREBY AGREE TO ASSUME ANY AND ALL RISKS OF INJURY OR DEATH, AND VERIFY THIS STATEMENT BY PLACING MY INITIALS HERE:

Initial Here 

As consideration for my being permitted by Habitat for Humanity of Greater Los Angeles and any of its affiliated organizations to participate in these activities and use their tools and facilities, I hereby agree that I, my assignees, their heirs, distributes, guardians, and legal representatives will not make a claim against, sue or attach the property of Habitat for Humanity of Greater Los Angeles or any affiliated organizations or the suppliers of any tools or equipment that I use in these activities, for injury or damage resulting from negligence or other acts, howsoever caused by any employee, agent, contractor of, or participant in Habitat for Humanity of Greater Los Angeles activities. I hereby release Habitat for Humanity of Greater Los Angeles and any of its affiliated organizations from all actions, claims or demands that I, my assignees, my heirs, distributes, guardians, and legal representatives now have or may hereafter have for injury or damages resulting from my participation in any Habitat for Humanity of Greater Los Angeles activities.

I hereby grant and convey unto Habitat for Humanity of Greater Los Angeles all right, title, and interest in any and all photographic images and video / audio recordings made by Habitat for Humanity of Greater Los Angeles during my activities with Habitat for Humanity of Greater Los Angeles, including but not limited to any royalties or other benefits derived from such photographs or recordings.

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 MYSELF AND HABITAT FOR HUMANITY OF GREATER LOS ANGELES AND ANY OF THEIR AFFILIATED ORGANIZATIONS. I AM SIGNING THE DOCUMENT OF MY OWN FREE WILL.

Executed on this _____ day of _____, 20 _____

Printed Name of Participant _____

Signature of Participant _____

Participant Address: Street _____

City/State/Zip _____

Home Phone _____

DECLARATION OF WITNESS: I certify that the person signed the above acknowledgment in my presence and that he/she read and fully understood the meaning and consequences of the foregoing assumption of risk, release of liability and agreement.

Witness' Signature _____ Date _____