

Release of All Claims and Assumption of Risk from Liability FOR MINORS

This Release and Waiver of Liability (the "Release") is executed on (date)

by (minor volunteer) ______ a minor child (the "Volunteer") and

by (parent/guardian) _______ the parent having legal custody and/or the legal guardian of the volunteer (the "Guardian"), in favor of Habitat for Humanity San Bernardino Area, Inc., a California nonprofit corporation, its directors, officers, employees, and agents (collectively, "Habitat")

The Volunteer and Guardian desire that the Volunteer work as a volunteer for Habitat and engage in the activities related to being a volunteer. The Volunteer and the Guardian understand that the activities may include constructing and rehabilitating residential buildings, working in the Habitat offices and living in housing provided for volunteers of Habitat.

The Volunteer and Guardian do hereby freely, voluntarily and without duress execute this Release under the following terms:

1. Waiver and Release. Volunteer and Guardian do hereby release and forever discharge and hold harmless Habitat and its successors and assigns from any and all liability, claims and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from Volunteer's work for Habitat.

Volunteer and Guardian understand that this Release discharges Habitat from any liability or claim that the Volunteer or Guardian may have against Habitat with respect to any bodily injury, personal injury, illness, death or property damage that may result from Volunteer's work for Habitat, whether caused by the negligence of Habitat of its officers, directors, employees, or agents or otherwise. Volunteer and Guardian also understand that Habitat does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance in the event of injury or illness.

2. Medical Treatment. Volunteer and Guardian do hereby release and forever discharge Habitat from any claim whatsoever that arises or may hereafter arise on account of any first aid, treatment or service rendered in connection with the Volunteer's work for Habitat or with the decision by any representative or agent of Habitat to exercise the power to consent to medical or dental treatment as such power may be granted and authorized in the Parental Authorization for Treatment of a Minor Child.

3. Assumption of the Risk. The Volunteer and Guardian understand that the work for Habitat may include activities that may be hazardous to the Volunteer, including, but not limited to, construction, loading and unloading, and transportation to and from the worksites.

Volunteer and Guardian hereby expressly and specifically assume the risk of injury or harm in these activities and release Habitat from all liability for injury, illness, death or property damage resulting from the activities of the Volunteer's work for Habitat.

4. Insurance. The Volunteer and Guardian understand that, except as otherwise agreed to by Habitat in writing, Habitat does not carry or maintain health, medical, or disability insurance coverage for any volunteer.

Each volunteer is expected and encouraged to obtain his or her own medical or health insurance coverage.

5. Photographic Release. Volunteer and Guardian do hereby grant and convey unto Habitat and UJIMA all right, title, and interest in any and all photographic images and video or audio recordings made by Habitat during the Volunteer's work for Habitat, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

6. Other. Volunteer and Guardian 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. Volunteer and Guardian agree that in the event that any clause or provision of the Release shall be held to be invalid by any court of competent jurisdiction, in invalidity of such clause or provision shall not otherwise affect the remaining provision of the Release which shall continue to be enforceable.

I hereby certify that my age is ______ and my birthdate is ______

Declaration of witness: I certify that the person who signed above acknowledged in my presence that he/she had read and fully understood the meaning and the consequences of the foregoing assumption of risk, release of liability and agreement, and signed it in my presence.

Executed at (city)		, California, on (date)	
Volunteer signature		_ Witness	
Parent/Guardian signature		_ Witness	
Parent/Guardian signature		_ Witness	
Volunteer address		City/ST	
Phone (home)	(work)	(cell)	

Emergency Medical Information

Are you taking any prescription medications of which emergency personnel or we should be aware? □Yes □No

If yes, please provide the name of the medication(s).

Do you have any allergies of which emergency personnel or we should be aware? (i.e. beestings, latex,
medications)
f yes, please detail the allergy(ies).

Do you have any health problems of which emergency personnel or we should be aware? (i.e. heart	
condition, asthma, limitations on heavy lifting)	
f yes, please describe.	

Date of last Tetanus booster:	Primary Care Provider:	Phone:
Emergency Contact:		Phone:

Building Homes, Lives, Hope"