

## **Christian Service Center for Central Florida, Inc. Volunteer Release and Waiver of Liability**

This release and Waiver of Liability (the "Release") executed on this \_\_\_\_\_ day of \_\_\_\_\_, by \_\_\_\_\_ (the "Participant") in favor of **THE CHRISTIAN SERVICE CENTER FOR CENTRAL FLORIDA, INC.**, a non-profit corporation organized and existing under the laws of the State of Florida, USA, its directors, officers, employees, volunteers and agents (collectively, "The Christian Service Center for Central Florida, Inc hereafter known as CSC.").

I, the Participant, desire to volunteer with CSC to provide and engage in the activities related to offering these services. I understand that the activities may include, but are not limited to, travel; transportation in my own or CSC-owned vehicles; moving and lifting heavy objects; cooking and serving food; and working with other volunteers and CSC staff, hereby freely and voluntarily, without duress, execute the Release under the following terms:

**1. Waiver and Release.** I, the Participant, release and forever discharge and hold harmless CSC from any claim or liability that I, the Participant, may have against CSC with respect to any bodily injury, personal injury, illness, death or property damage that may result from my participation in these volunteer activities. I also understand that CSC does not assume any responsibility or obligation to provide financial or other assistance, including, but not limited to medical, health, or disability insurance, in the event of injury, illness, death or property damage.

**2. Insurance.** CSC does not carry or maintain, and expressly disclaims responsibility for providing any health, medical or disability insurance coverage for the Participant. EACH PARTICIPANT IS EXPECTED AND ENCOURAGED TO CARRY PERSONAL LIABILITY OR HEALTH INSURANCE PRIOR TO REGISTERING AS A CSC VOLUNTEER.

**3. Medical Treatment.** Except as otherwise agreed to by CSC in writing, I hereby release and forever discharge CSC from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during my time with CSC.

**4. Assumption of Risk.** I understand that my time with CSC may include activities that may be hazardous to me, including, but not limited to, cook and food preparation activities, loading and unloading of heavy equipment and materials, transportation to and from pick up/drop off sites and I recognize and understand that my time with CSC may, in some situations, involve inherently dangerous activities. I hereby expressly and specifically assume the risk of injury or harm in these activities and release CSC from all liability for injury, illness, death or property damage resulting from the activities of my time with CSC.

**5. Photographic Release.** I grant and convey unto CSC all right, title and interest in any and all photographic images and video or audio recordings made by CSC during my work for CSC, including, but not limited to, any royalties, proceeds or other benefits derived from such photographs or recordings.

**6. Other.** I understand that it is my desire to further the work CSC by performing services as a Volunteer, specifically as a Volunteer with CSC. I undertake to perform said services as a Volunteer without compensation and that, in performing said services, I acknowledge that I am not acting as an employee of CSC.

To express my understanding of this Release, I sign here with a witness.

**Participant Name (please print):**

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

**Witness Name (please print):**

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