



Volunteer Waiver, Release and Indemnity Agreement, Photo Release

I HEREBY acknowledge that I am willingly and voluntarily entering into a ministry venture with other volunteers, both skilled and unskilled, for the purpose of assisting people in a ministry context. I represent that I am acting in a strictly volunteer capacity, (that I am paying my own expenses and providing my own insurance, both health and property).

I understand and acknowledge that the work I will be involved in may at times be hazardous and I assume all risks associated with my involvement in this effort. I further acknowledge that accidents may occur on or around the work site and traveling to and from said site, involving motor vehicles, or tools and equipment. I understand that any motor vehicle in which I may be transported in will be operated by licensed drivers, who may or may not be professional drivers.

I therefore waive, release, agree to indemnify and hold harmless Wightman UMC, employees, representatives, and volunteers with whom I may be working from any and all liability claims, injuries, damages, losses, expenses of attorneys fees, actions or causes of actions which I have or may hereafter discover as a result of my participation in this ministry effort. I further waive/release, indemnify and hold harmless all parties herein and above mentioned from any claim, action, cause of damages, injuries or losses of any kind which my heirs, administrators, executors or assigns may attempt to assert on my behalf.

I further release all parties above mentioned for any losses or damages to vehicles, tools or equipment, which I may own and have used in connection with this ministry site. I understand that I am expected to provide my own insurance in case of accident, illness or injury and that Wightman UMC does not provide insurance for volunteers. Personal liability insurance is the responsibility of the volunteers.

I agree that I will not use my affiliation with Wightman UMC to further my own "for profit" business or business venture. I will further allow Wightman UMC to use any photos taken of myself and my team for future publications.

Signed on the _____ day of _____ 20__.

Volunteer worker's signature

Volunteer worker's printed name

Signature(s) of parent/guardian if volunteer is under 18

Signature of first witness

Printed name of first witness

Signature of second witness

Printed name of second witness

Emergency/Insurance Information

In case of emergency notify: _____

Phone number(s) of above named: _____

In case of emergency notify (secondary contact): _____

Phone number(s) of secondary contact: _____

Insurance Carrier: _____

Policy & Group number(s): _____

Allergies/Medical Conditions: _____