



PLEASE READ CAREFULLY! THIS IS A LEGAL DOCUMENT THAT AFFECTS YOUR LEGAL RIGHTS!

This Release & Waiver of Liability (the "Release") executed on this _____ day of _____ 2017

(PRINT YOUR NAME)

in favor of Habitat for Humanity International, Inc., a nonprofit corporation, and Bend Area Habitat for Humanity, an Oregon, nonprofit organization, their directors, officers, employees, and agents (collectively "Habitat").

The Volunteer, who is at least 16 years old, desires to work as a volunteer for Bend Area Habitat for Humanity, Bend and engage in the activities related to being a volunteer (the "Activities"). The Volunteer understands that the Activities may include constructing and rehabilitating residential buildings, working in the Habitat offices, and/or ReStore. Individuals between the ages of 9 and 16 years old may volunteer at ReStore with prior authorization.

The volunteer hereby freely, voluntarily, and without duress executes this Release under the following terms:

RELEASE & WAIVER: Volunteer does 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 Activities with Habitat. Volunteer understands that this Release discharges Habitat from any liability or claim that the Volunteer may have against Habitat with respect to any bodily injury, personal injury, illness, death, or property damage that may result from Volunteer's Activities with Habitat, whether caused by the negligence of Habitat or its officers, directors, employees, or agents or otherwise. Volunteer also understands 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.

MEDICAL TREATMENT: Volunteer does hereby release and forever discharge Habitat from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the Volunteer's Activities with Habitat.

ASSUMPTION OF THE RISK: The Volunteer understands that the Activities include work that may be hazardous to the volunteer, including, but not limited to, construction, loading and unloading, and transportation to and from the work sites.

Volunteer hereby expressly and specifically assumes the risk of injury or harm in the Activities and releases Habitat from all liability of injury, illness, death, or property damage resulting from the Activities.

INSURANCE: The Volunteer understands 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/HER OWN MEDICAL OR HEALTH INSURANCE COVERAGE

PHOTOGRAPHIC RELEASE: Volunteer does hereby grant and convey unto Habitat all right, title, and interest in any and all photographic images and video or audio recordings made by Habitat during the Volunteer's Activities with Habitat, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

The following items are not permitted: Alcohol, tobacco products, illegal drugs, and fire arms are absolutely not permitted on the construction site(s), at ReStore, or wherever Bend Habitat activities are taking place.

OTHER: Volunteer expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Oregon, and that this Release shall be governed by and interpreted in accordance with the laws of the State of Oregon. Volunteer agrees that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable.

_____ New Volunteer _____ Current Volunteer _____ Previous Volunteer

ADDRESS _____ CITY _____ ZIP _____

PHONE _____ EMAIL _____

Volunteers under 18 must have LEGAL GUARDIAN SIGNATURE _____

VOLUNTEER SIGNATURE _____ BIRTHDATE _____

EMERGENCY CONTACT NAME _____ RELATIONSHIP _____

PHONE _____

Are you a member of Thrivent Financial? (We track this for grant purposes) Yes No
Are you volunteering as a result of a court-ordered service? Yes # Hours _____ No

*I have read and understand the BAHFH Code of Conduct (on reverse side.) _____ (Initials)

*This form must be signed and submitted to either Bend Area Habitat for Humanity Office



Code of Conduct:

- Dress appropriately (ie: long pants, closed-toe shoes, shirts must be worn at all times) for work site and expected duties.
- Habitat sites, including offices and ReStores, encourage the use of appropriate language.
- Habitat is a drug free workplace. You may not possess, use or distribute drugs while in the work place or doing business for Habitat.
 - o If you are currently taking any prescribed medications that might impair your ability to perform your duties, please inform Habitat staff at the job site immediately. Your safety and the safety of your fellow volunteers and our staff are of the utmost importance to us.
- Habitat work sites are tobacco and alcohol free. If you must smoke, you may do that on the outside of Habitat property.
- Our goal is for you to have a rewarding and fulfilling experience volunteering with us. In the event that you witness or experience anything inappropriate for a professional work environment, please inform Habitat staff immediately so that an official grievance can be filed.

Thank you for your willingness to volunteer with us. Your commitment, both of time and energy, make a difference to families in our community. You are helping make the dream of homeownership a reality for so many.

For office use only:

_____ Construction _____ ReStore _____ Other _____

Training date & time _____ Start date & time _____

Volunteer Up _____ Constant Contact _____

Special information:
