

ReLeaf Michigan, Inc.

REQUIRED VOLUNTEER PERMISSION FORM

- ADULT/FAMILY -

Volunteer Emergency Information & Hold Harmless Release Form

Community in Which Planting is Taking Place _____

Participant's Name: _____

Address: _____ City: _____, Michigan ZIP: _____

Home Phone: (____) _____ - _____ Cell Phone (if applicable): (____) _____ - _____

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

I, _____, (the **Volunteer**) desire to participate as a volunteer in various programs, events or activities, (hereafter collectively referred to as "ACTIVITIES") operated or sponsored by **ReLeaf Michigan, Inc.** The Volunteer desires to work as a volunteer for **ReLeaf Michigan, Inc.** and engage in the activities related to being a volunteer. The **Volunteer** understands that the Activities may be hazardous and may include construction, neighborhood beautification, planting of trees, loading and unloading, transportation and participating at special events. The Volunteer understands that he/she is not an employee of **ReLeaf Michigan, Inc.** and is not entitled to any wages, benefits or other compensation. In consideration of the permission granted to participate in the Activities, the **Volunteer** hereby freely and without duress executes this Release under the terms below:

1. **Release and Waiver:** The **Volunteer** hereby AGREES TO WAIVE, RELEASE, FOREVER DISCHARGE and HOLD HARMLESS **ReLeaf Michigan, Inc.** and any of its officers, directors, employees, affiliates, agents, homeowners, project owners, other volunteers, representatives, successors, assigns, and partners from any and all liability, actions, causes of action, demands, damages (any illness, death, bodily injury, personal injury or property damage) and claims of every kind or nature, either in law or in equity, which arise or may hereafter arise from the Volunteer's Activities. The **Volunteer** further RELEASES, FOREVER DISCHARGES AND AGREES TO HOLD HARMLESS **ReLeaf Michigan, Inc.** and any of its officers, directors, employees, affiliates, agents, representatives, successors, assigns, and partners from any and all liability arising from **ReLeaf Michigan, Inc.** and any of its officers, directors, employees, affiliates, agents, homeowners, project owners, other volunteers, partners, or representative's OWN NEGLIGENCE, CARELESSNESS, OR OTHER.

2. **Assumption of Risk:** The **Volunteer** understands that the Activities might involve physical activity, loading and unloading, transportation to and from the work sites, contact with unidentified and/or unfamiliar persons, unanticipated hazards, unexpected dangers and other potential risks of bodily injury or damage to property. The **Volunteer** represents that the Volunteer has no physical or mental conditions which to their knowledge, would endanger the Volunteer and any other person, or would interfere with the Volunteer's ability to participate in the Activities. The **Volunteer** fully realizes the dangers of participating in the Activities and agrees that the Volunteer is solely responsible for his/her safety and health conditions (and any limitations imposed thereby). The **Volunteer** hereby expressly and specifically assumes any and all risks of injury, illness or harm caused or sustained during the Volunteer's participation of the Activities.

3. **Medical Treatment:** The **Volunteer** understands that **ReLeaf Michigan, Inc.** does not assume any responsibility or obligation to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance in the event of any illness, bodily injury or personal injury sustained by the Volunteer. The **Volunteer** hereby RELEASES, FOREVER DISCHARGES AND AGREES TO HOLD HARMLESS **ReLeaf Michigan, Inc.** and any of its officers, directors, employees, affiliates, agents, representatives, successors, assigns, and partners from any and all claims, costs,

expenses, damages whatsoever which arise or may hereafter arise on account of any first aid, physical or mental health treatment, or medical service rendered as a result of the Volunteer's Activities with **ReLeaf Michigan, Inc.**

4. **Insurance:** The **Volunteer** understands that **ReLeaf Michigan, Inc. 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 personal/family medical health insurance coverage.** In the event the **Volunteer** suffers an injury or condition during participation in Activities, the **Volunteer** authorizes the Team or Project leader to contact the Emergency Contact Person indicated below to advise them of the Volunteer's injury or condition and to consult with them regarding the Volunteer's injury or condition.

5. **Photographic Release:** **Volunteer** does hereby grant and convey unto **ReLeaf Michigan, Inc.** all right, title, and interest in any and all photographic images and video or audio recordings made by **ReLeaf Michigan, Inc. and its volunteers, representatives and partners** during the Volunteer's Activities with **ReLeaf Michigan, Inc.**, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

By signing below, the Volunteer has read, understood, and executed this Release as of the date.

Signature of Volunteer: _____

Date: _____

Contact Person in case of Emergency: _____

Ph: (____) ____ - _____

If Participant is a minor, the undersigned parent or legal guardian of the Participant confirms and attests that he or she has the legal right to and, by signing below, the undersigned does hereby consent to the terms and conditions of this Waiver.

**Participant Parent or Legal
Guardian if a Minor**

Printed Name

Date