ARMS OF HOPE

VOLUNTEER PARTICIPATION AND RELEASE FROM LIABILITY

I __________________________ agree to the following:

(Volunteers Name)

• That Arms of Hope is not responsible for any personal property lost, damaged or stolen while participating in activities on the Arms of Hope campus or at an Arms of Hope event.

• That Arms of Hope has the right to provide or arrange for emergency care and to provide or arrange for emergency care transportation if medical treatment is deemed to be necessary by Arms of Hope staff. Arms of Hope is not financially responsible for such treatment.

• That Arms of Hope (including directors, staff and other volunteers) is released from all liability based on any damage or injury to my person, whether it is the result of negligence or otherwise.

• That Arms of Hope can use any photograph or video that contains my image for its publication purposes, including: marketing, fundraising and/or informational presentations.

• That by signing this document, I am aware that certain activities involve risk and I freely assume the risk of any and all activities I engage in while on an Arms of Hope campus or at an Arms of Hope event.

_______________________________________________________________
Signature of Participant or of Legal Guardian if Participant is under 18

_______________________________________________________________
Printed Name of Signee

_______________________________________________________________
Date