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**2017 VOLUNTEER RELEASE AND WAIVER OF LIABILITY  
 FOR MINORS (AGE 17 AND UNDER)**

Volunteer's Name: \_\_\_\_\_ DOB \_\_\_\_\_ Phone: \_\_\_\_\_  
 (mo/day/yr)

Mailing Address: \_\_\_\_\_ Zip \_\_\_\_\_

By supplying an email address you will be included in periodic email blasts about volunteer needs and upcoming Habitat events. Email Address: \_\_\_\_\_@\_\_\_\_\_

If at any time you wish to unsubscribe from these communications, please follow the unsubscribe information contained in the emails. We will not share, sell or "loan" our email lists to anyone outside the Affiliate.

**THIS RELEASE AND WAIVER OF LIABILITY** (the "Release") executed on this \_\_\_ day of \_\_\_\_\_, **2017** by \_\_\_\_\_, a minor child (the "Volunteer"), and \_\_\_\_\_, the parent having legal custody and/or the legal guardian of the Volunteer (the "Guardian"), in favor of Habitat for Humanity International, Inc. a nonprofit corporation, and Habitat for Humanity-Anchorage, an Alaska nonprofit corporation, their directors, officers, employees, and agents (collectively, "Habitat").

The Volunteer and Guardian desire that the Volunteer work as a volunteer for Habitat and engage in the activities related to being a volunteer (the "Activities"). The Volunteer and the Guardian understand that the Activities may include constructing and rehabilitating residential buildings, working in the Habitat office, working in the Habitat ReStore, living in housing provided for volunteers of Habitat, and other sponsored activities that may include, but are not limited to, traveling to and from other towns, recreational activities, consuming food, and living in accommodations available and provided in other towns. The Volunteer and Guardian understand that there are hazards and risks to person and personal property in construction and rehabilitating residential buildings, working in the Habitat office, working in the Habitat ReStore, living in housing provided for volunteers of Habitat, traveling to and from other towns, recreational activities, consuming food, and living in accommodations available and provided in other towns, and that the hazards may occur from the actions of other volunteers, or actions of Habitat, its directors, officers, employees, and agents.

The Volunteer and Guardian do hereby freely, voluntarily, and without duress execute this Release under the following terms:

**Release and Waiver:** Volunteer and Guardian do 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 and Guardian understand that this Release discharges Habitat from any liability or claim that the Volunteer or Guardian 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



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negligence of Habitat or its officers, directors, employees, or agents or otherwise. Volunteer and Guardian also understand 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.

It is the policy of Habitat that **children ages 14 and 15** are not allowed on a Habitat worksite while there is construction in progress. They may engage in limited activities such as clearing lots, landscaping or painting when construction is not in progress and may work in the Habitat ReStore or Habitat Office. Children 14 and 15 may participate in these activities if accompanied by a parent or other responsible adult (age 21 or older) and a ratio of 1 adult: 1-5 youth, 2 adults: 6-10 youth, etc. is maintained at all times.

It is further the policy of Habitat that **children ages 16 and 17** may be allowed to participate in construction work, if accompanied by a parent or other responsible adult (age 21 or older) and a ratio of 1 adult: 1-5 youth, 2 adults: 6 – 10 youth, etc. is maintained at all times; however, ultra hazardous activity such as using power tools or ladders, operating motor vehicles, excavation or demolition operations, or working on rooftops is not permitted under any circumstances by anyone under the age of 18.

**Medical Treatment:** Volunteer and Guardian do 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 or with the decision by any representative or agent of Habitat to exercise the power to consent to medical or dental treatment as such power may be granted and authorized in the Parental Authorization for Treatment of a Minor Child.

**Assumption of the Risk:** The Volunteer and Guardian understand that the Activities may 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 and Guardian hereby expressly and specifically assume the risk of injury or harm in the Activities and release Habitat from all liability for injury, illness, death, or property damage resulting from the Activities.

**Insurance:** The Volunteer and Guardian understand 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.

**The Guardian and Volunteer are expected and encouraged to obtain medical or health insurance coverage for the Volunteer.**

**Photographic Release:** Volunteer and Guardian do 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.



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**Other:** Volunteer and Guardian expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Alaska, and that this Release shall be governed by and interpreted in accordance with the laws of the State of Alaska. Volunteer and Guardian agree 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.

The Volunteer and Guardian intend this Release to be in effect for each and every time Volunteer participates in Activities during the year 2017, without signing a new Release.

IN WITNESS WHEREOF, Volunteer and Guardian have executed this Release as of the day and year first above written.

Witness: \_\_\_\_\_ Volunteer: \_\_\_\_\_

Witness: \_\_\_\_\_ Parent or Guardian: \_\_\_\_\_

Witness: \_\_\_\_\_ Parent or Guardian: \_\_\_\_\_

Parent or Guardian's Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Parent or Guardian's Phone: Day \_\_\_\_\_ Evening \_\_\_\_\_ Cell \_\_\_\_\_



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**PARENTAL AUTHORIZATION FOR TREATMENT OF A MINOR CHILD**

I, \_\_\_\_\_, am the parent or legal guardian having custody of  
(Parent/ Guardian)

\_\_\_\_\_, a minor child. As such parent or legal guardian, I hereby authorize and  
(Child)

appoint \_\_\_\_\_, an adult in whose care the minor child has been entrusted or a  
(Work-site care provider)

duly authorized agent of Habitat for Humanity-Anchorage, Inc., as my agent to act for me with respect to

my minor child, \_\_\_\_\_, and in my name in any way I could act in person to make any and all  
(Child)

decisions for me with respect to my minor child, \_\_\_\_\_, concerning my minor child's  
(Child)

personal care, medical treatment, hospitalization, and health care and to require, withhold or withdraw

any type of medical treatment or procedure, including X-ray examination, anesthetic, medical or surgical

diagnosis or treatment which may be rendered to my minor child under the general or special supervision

and on the advice of any physician or surgeon licensed to practice in the state in which treatment is

sought. My agent shall have the same access to my minor child's medical records that I have, including the

right to disclose the contents to others.

Witness:

Parent or Guardian:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_



## ***VOLUNTEER RELEASE AND WAIVER OF LIABILITY FOR MINORS (AGE 17 AND UNDER)***

### **PLEASE PRINT LEGIBLY**

In case of emergency, please contact:

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: (home) \_\_\_\_\_

(work) \_\_\_\_\_

(cell) \_\_\_\_\_

The following information may be needed by any hospital or medical practitioner not having access to the Volunteer's medical history:

Allergies (**Medicine**, food, etc.): \_\_\_\_\_

\_\_\_\_\_

Medication being taken: \_\_\_\_\_

Date of last tetanus shot: \_\_\_\_\_

Physical Impairments: \_\_\_\_\_

Other: \_\_\_\_\_

\_\_\_\_\_

Personal Doctor:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Health Insurance Coverage:

Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Insurance Agent: \_\_\_\_\_

Our **Partner Families** are able, thanks to **Habitat** and **you**, to help build their own home and then be able to purchase it at cost with a no-interest mortgage. A decent, affordable place to live is life changing for our families. **Thank you** for helping Habitat for Humanity Anchorage work to achieve our mission to eliminate substandard housing in Anchorage, Alaska, and make adequate housing a matter of conscience and action.