UNITED WAY HANDS ON

Volunteer Center for United Way of Central Alabama

Volunteer Agreement and Release

I, the undersigned, wish to volunteer my services to various community service organizations and projects through you, United Way Hands On, an Alabama nonprofit corporation ("Hands On"). In consideration of your locating, arranging, coordinating and/or making available volunteer opportunities, I hereby agree and release you as follows:

I acknowledge and agree that the volunteer services typically performed by Hands On volunteers, and which I may perform as a Hands On volunteer, may involve (a) physical activity (including work with heavy tools and materials), (b) contact with unidentified and unfamiliar persons, (c) travel to and from various unspecified locations, and (d) other potential risk of injury, including exposure to the COVID-19 virus and other diseases. I willingly and freely agree to volunteer and hereby assume any and all risk and liability in connection with my participation as a Hands On volunteer, including without limitation risk of any disease, infection, accident or injury to person or property which I may sustain or which I may cause.

I specifically agree to comply with Hands On procedures and directions from Hands On staff that may be related to health and safety, which may include wearing a mask or gloves, physical distancing, washing hands, and temperature checks. I understand that Hands On cannot guarantee the health and safety of its staff and volunteers in all circumstances. I will promptly inform Hands On staff if I feel injured, ill or sick.

I hereby release you, your affiliates, and the directors, officers, partners, agents, employees, successors, assigns, licensees, sponsors, donors, volunteers, representatives, and guests of you and your affiliates (collectively, the "Hands On Related Parties") from, and covenant not to sue you or any Hands On Related Party for, any and all liability, claims and causes of action, whether known or unknown, arising out of, based upon or relating to my participation as a Hands On volunteer or in any related activity or project.

I acknowledge that Hands On is involved in assisting organizations and associations which may from time to time be involved with childcare and related matters. I hereby confirm, represent and warrant that I have never been convicted of a violent crime, child abuse or neglect, child pornography, child abduction, kidnapping, rape or sexual offense, nor have I ever been ordered by a court to receive psychiatric or psychological treatment in connection with any of the foregoing.

I further irrevocably grant to Hands On, its assigns and successors, my consent and full right to use my name, photograph, likeness, image, voice and biography in any and all media, publications, advertising, and publicity, in connection with my participation hereunder.

This release shall insure to your benefit, as well as to the benefit of your successors, licensee, agents, employees, affiliates and assigns. This release shall be governed by the laws of the State of Alabama.

Signature of Participant:_____ Date:_____

(If Participant is a minor, signature of Parent or Guardian)

Please print clearly

Participant's Name:_____ Date of Birth:_____

Emergency Contact : _____ Phone: _____

Parent/Guardian (If Applicable):_____

Mailing Address:_____ City:_____ State:_____ Zip:_____

Home Phone:_____ Email Address:_____