

Parent/Guardian:

## **Volunteer Waiver**

Before you begin your volunteer shift, you must read and complete this form in its entirety. Return the finished form to the Construction Supervisor, House Leader, or Volunteer Manager. Volunteers must update this waiver annually.

- **1.** I have voluntarily applied to HABITAT FOR HUMANITY MADISON & CLARK COUNTIES/ReSTORE to participate in activities and receive information related to their work.
- **2.** I am aware that there is a certain amount of risk inherent in construction materials and other projects pertaining to the work done by Habitat for Humanity of Madison and Clark Counties.
- **3.** As consideration for being permitted by Habitat to participate in these activities and use their tools and/or facilities, I hereby agree that I, and my assignees, heirs, guardians, and legal representatives will not make claim against, sue, or attach the property of Habitat/ReStore, or the suppliers of any tools or equipment I will use, for injury or damage resulting from my participation in any Habitat activities, and I hereby release Habitat from all actions, claims, or demands that I, my assignees, my heirs, guardians, and legal representatives now have or may hereafter have for injury or damage resulting from my participation in any Habitat activities.
- **4.** I hereby release and forever discharge Habitat from any claims whatsoever which arise or may hereafter arise on account of any first aid, treatment, or service rendered in connection with participation in Habitat's work.
- **5.** I understand that although Habitat carries medical insurance for volunteers, it is considered secondary coverage; **my own health** insurance is primary coverage. I authorize Habitat to discuss my emergency health condition with emergency contact listed.
- **6.** I agree that this Volunteer Agreement is intended to be as broad and inclusive as permitted by the laws of the State of Kentucky and that this Agreement shall be governed by and interpreted in accordance with the laws of the State of Kentucky. I agree that in the event that any clause or provision of this Agreement shall be held to be invalid by any other court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Agreement, which shall continue to be enforced.

Unskilled

7. I hereby agree that Habitat/ReStore may use my photographic image or likeness taken from my participation in any Habitat activities for any purpose including for use in promotional materials and on the Internet.

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Name	Name									-	lled	
Phone Number								Skilled	Semi-Skilled			
Email								Areas of Expertise			L	
Address								Foundation & Concrete				
Address									Framing			l
City, State								Roofing				
	In c	250 0	fama	rganc	v contact:			7	Windows & Doors			
Name	case of emergency, contact:						Electrical			Ī		
								-	Siding			
Relation								Decking			ĺ	
Phone	hone								Insulation			
								_	Painting			l
Days Available		AM	PM									۱
All Days—				Are you comfortable working:		Q.		Trim Carpentry			L	
All Days—Tues thru Sat  Tuesday									Cabinets			
				Over your head				Locks & General Hardware			l	
				On a ladder				Landscaping			ľ	
				On scaffolding							_	
			With power tools			Cleanup			l			

By signing below, the volunteer and/or parent/guardian has read the agreement and understand its contents. The									
volunteer hereby freely, voluntarily, and without duress executes this agreement.									
Signed (volunteer):	Date:	/ /	•						

City, State: \_\_\_\_\_