VOLUNTEER WAIVER & RELEASE OF LIABILITY FORM

VOLUNTEERS MUST COMPLETE THE WAIVER AND RELEASE FORM PARENT/LEGAL GUARDIAN SIGNATURE IS REQUIRED IF VOLUNTEER IS UNDER AGE. WAIVER AND RELEASE FORM RELEASE OF LIABILITY

In return for being allowed to participate in Uplift volunteer activities and all related activities, including any activities incidental to such participation ("Volunteer Activities"), the undersigned Volunteer or Parent/Legal Guardian of Volunteer if Volunteer is under age 18 (hereafter referred to using "I", "me", or "my") releases and agrees not to sue the or its officers, directors, employees, sub-contractors, sponsors, agents and affiliates from all present and future claims that may be made by me, my family, estate, heirs, or assigns for property damage, personal injury, or wrongful death arising as a result of my participation in the Volunteer Activities wherever, whenever, or however the same may occur.

I understand and agree that Uplift is not responsible for any injury or property damage arising out of the Volunteer Activities, even if caused by their ordinary pedigence or otherwise. Lunderstand that participation in the Volunteer Activities are property of the volunteer activities.

caused by their ordinary negligence or otherwise. I understand that participation in the Volunteer Activities involves certain risks, including, but not limited to, serious injury and death. I am voluntarily participating in the Volunteer Activities with knowledge of the danger involved and I agree to accept all risks of participation. I also agree to indemnify and hold harmless Uplift for all claims arising out of my participation

in the Volunteer Activities. I understand that this document is intended to be as broad and

including an appreciated by the laws of the state in which the Volunteer Activities take place and

inclusive as permitted by the laws of the state in whi	ch the volunteer Activities take place and
agree that if any portion of this Agreement is invalid,	, the remainder will continue in full legal
force and effect. I also acknowledge that	Uplift
have not arranged and do not carry any insurance o	f any kind for my benefit or that of Volunteer
(if Volunteer is under 18), my parents, guardians, tru	ustees, heirs, executors, administrators,
successors and assigns.	
I represent that, to my knowledge, I am in good hea	th and suffer no physical impairment that
would or should prevent my participation in Voluntee	er Activities. I also understand that this
document is a contract which grants certain rights to	and eliminates the liability of the
Uplift Organization.	

(Signature of Volunteer):	Date:
I am of legal age and am freely signing this agre that by signing this form, I am giving up legal rigi	ement. I have read this form and understand
(Signature of Parent/Legal Guardian if Volunteer	is Under 18):
Date:	
I am the parent or legal guardian of the Voluntee agreement. I have read this form and understand rights and remedies.	
PUBLICITY RELEASE	
In return for being allowed to participate in	Uplift
volunteer activities and all related activities, incluparticipation ("Volunteer Activities"), the undersign Volunteer if Volunteer is under age 18 (hereafter grants to	gned Volunteer or Parent/Legal Guardian of referred to using "I", "me", or "my") hereby ir, subsidiaries, ncies, and partners, and all such entities' e successors and assigns (collectively, ble right and permission to use, publish, s name, address, voice, photograph and/or its current form or as retouched, digitized, y, in any and all advertising, promotional, or Volunteer Activities in any manner, in any media by way of example but without limitation and services throughout the universe, in
I further agree that anything derived there from we shall not authorize the use of any print, negative Authorized Parties. I understand that this documpermitted by the laws of the state in which the Vo any portion of this Agreement is invalid, the remains	or other copy thereof by anyone other than the ent is intended to be as broad and inclusive as blunteer Activities take place and agree that if
(Signature of Volunteer):	Date:
I am of legal age and am freely signing this agree that by signing this form, I am giving up legal righ	ement. I have read this form and understand
(Signature of Parent/Legal Guardian if Volunteer Date:	is Under 18):

I am the parent or legal guardian of the Volunteer. I am of legal age and am freely signing this agreement. I have read this form and understand that by signing this form, I am giving up legal rights and remedies.