

## LIABILITY WAIVER & RELEASE



Because no one should go hungry.

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

**Email:** \_\_\_\_\_

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

**Group Name (if applicable):** \_\_\_\_\_

**Emergency Contact Name & Phone:** \_\_\_\_\_

Feeding Tampa Bay (FTB) is a non-profit organization dedicated to the collection and distribution of food to those in need. I intend to assist FTB as a volunteer. Volunteer activities may include, but are not limited to food reclamation, sorting or distribution at the FTB facility or off-site activities such as assisting with mobile pantry food distribution programs. In consideration of participating as a volunteer and in recognition of the nonprofit status of FTB, I hereby agree as follows:

1. I hereby release Feeding Tampa Bay from, and waive on behalf of myself and my heirs and any minors indicated below, any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that may be caused by any act, or failure to act of FTB, or that may otherwise arise in any way in connection with any voluntary activities with or for FTB.
2. This Liability Waiver and Release extends to FTB together with all of its officers, directors, affiliates and agents.
3. I assume the risk of any and all dangerous conditions in and about Feeding Tampa Bay facilities or in connection with any off-site voluntary activities.
4. Carrying or possession of a weapon, whether concealed or unconcealed, by an employee, guest, or invitee anywhere on Organization property, surrounding premises, in Organization vehicles, or while on Organization business is prohibited. Violation of this policy is cause for removal from volunteer activity.
5. IT IS MY INTENTION BY THIS LIABILITY WAIVER AND RELEASE TO EXEMPT FEEDING TAMPA BAY AND ALL OFFICERS, DIRECTORS, AFFILIATES AND AGENTS FROM ALL LIABILITY WHATSOEVER FOR PERSONAL INJURY, PROPERTY DAMAGE AND WRONGFUL DEATH.
6. This waiver contains the entire agreement between myself and the parties released and their affiliates.
7. This waiver is also given on behalf of the following minor(s). (Note: A parent/guardian must sign if this waiver is for a minor.)
8. I give my consent for participating in any videos and photography that may be used by Feeding Tampa Bay in any publicity and/or social media. I release (FTB) from any liability in connection with the use of such materials.
9. I have read this waiver, understand it, and am signing it voluntarily.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Minor(s) Names:** \_\_\_\_\_

**Thank you for volunteering with Feeding Tampa Bay!**