Habitat for Humanity®
of Forsyth County

RELEASE OF LIABILITY - MINOR VOLUNTEER

I hereby certify that I am the parent and/or legal guardian of _____, whose date of birth is _____ ("Child"). I understand and acknowledge that my Child desires to perform volunteer construction and other services for Habitat for Humanity of Forsyth County, Inc. ("Habitat"). I am aware that working on a construction project involves certain risks which could include bodily injury and property damage to my Child. This is typical of any construction project on which persons are using equipment, tools and construction materials. In addition, I acknowledge that those persons working on a Habitat construction project are often not professionally trained in the construction industry and that such training is not a requirement to work on such a project. I further acknowledge that such persons are generally not Habitat employees and Habitat does not supervise their work. Therefore, for good and adequate consideration, including but not limited to the opportunity for my Child to participate in Habitat projects and services, I acknowledge and agree as follows:

(1) Release. Habitat is not and will not be responsible for any accident, injury or damages of whatever nature that may occur to my Child or me while my Child is performing construction or other services for Habitat or as part of a Habitat project. I hereby for myself and my Child, and our successors or assigns, forever release, discharge and hold harmless Habitat, its successors, assigns, directors, officers, agents and employees, from any and all liability, lawsuits and/or claims which may arise from or otherwise be connected with a Habitat project or service. This release shall apply regardless of the person or entity that caused the damage or injury to my Child or me, including but not limited to the parties released herein.

(2) Insurance. I understand that Habitat has only limited medical liability insurance. I am solely responsible for ensuring that my Child and I have adequate insurance coverage for any injuries or damages sustained by my Child or me while my Child is participating in a Habitat project or service. I understand that at no time is my Child to be considered an "employee" of Habitat.

(3) Photograph and Audio Visual Release. Habitat will have the exclusive right to use any and all photographs, video and audio recordings of my Child taken in connection with a Habitat project or service, and is entitled to all compensation related thereto including, but not limited to, any royalties, proceeds or other benefits derived from those photographs or recordings.

(4) Governing Law. This release shall be governed and construed in accordance with the laws of the State of North Carolina.

I HAVE READ THIS RELEASE, I UNDERSTAND AND CONSENT TO ITS TERMS, AND I SIGN THIS RELEASE OF MY OWN FREE ACT AND WILL.

_____ _____

Today's Date Signature of Parent or Legal Guardian

PLEASE PRINT ALL INFORMATION:

Name of Parent or Guardian:

_____

Name of Minor: _____

Minor Date of Birth: _____/_____/_____

Address: _____

Street City State Zip

Parent's phone number: _____

Minor's email address or family e-address:

_____

Emergency Contact: Name: _____ Relationship: _____

Telephone: _____