

**Release and Waiver: Please read carefully! This legal document affects your legal rights.**

North St. Louis County Habitat for Humanity prohibits any actions or conduct which may discriminate against or harass other employees, volunteers, partner families or applicants for a Habitat home!

As a volunteer, I desire to work for Habitat and engage in the activities related to being a volunteer. These may include constructing and rehabilitating residential buildings. I freely, voluntarily, and without duress execute this release under the following terms

**1. Waiver and Release.**

I do hereby release and forever discharge and hold harmless Habitat and its successors and assigns from any and all liability, claims, demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from the volunteers work for Habitat.

I, the Volunteer understand and acknowledges that this Release discharges Habitat from any liability or claim that the Volunteer may have against Habitat with respect to any bodily injury, personal injury, illness, death or property damage that may result from Volunteers work for Habitat. Volunteer also understands that, except as otherwise agreed to by Habitat in writing, Habitat does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health or disability insurance, in the event of injury or illness.

I, the Volunteer, acknowledge and understand that participation in the Activities may involve certain risks, including, but not limited to, personal injury(ies), bodily injury, illness, permanent disability, property damage, loss and/or death ("Risks"). These Risks include, but are not limited to, exposure to and/or infection with COVID-19 and/or other viruses and/or bacterial infection even in ideal conditions, and despite any and all reasonable efforts made to mitigate such Risks. I further acknowledge and agree that, due to the nature of the Activities, social distancing of six feet per person will not always be possible and that my participation in the Activities may result in an elevated risk of contracting COVID-19 and/or other viruses and/or bacterial infection.

I, the Volunteer, further confirm that prior to engaging in the Activities, I may be required to complete a COVID-19 health screening questionnaire provided by one or more of the Released Parties. I agree that I will answer all questions on the questionnaire truthfully. I agree to not participate in any Activities if, at such time and to the best of my knowledge, I am a carrier of COVID-19 or infected with COVID-19. I further agree to follow all safety precautions outlined by any Released Party while volunteering.

**2. Medical Treatment.** Except as otherwise agreed to by Habitat in writing. Volunteer does hereby release and forever discharge connection with the Volunteers work for Habitat For Humanity.

**3. Assumption of Risk.** The Volunteer understands that the work for Habitat may include activities that may be hazardous to the Volunteer, including, but not limited to, construction, loading and unloading, and transportation to and from the work sites. Volunteer hereby expressly and specifically assumes the risk of injury or harm in these activities and releases Habitat from all liability for injury, illness, death, or property damage resulting from the activities of the Volunteer's work for Habitat.

**4. Insurance.** The Volunteer understands that, except as otherwise agreed to by Habitat in writing; Habitat does not carry or maintain health, medical or disability insurance coverage for any Volunteer. **EACH VOLUNTEER IS EXPECTED AND ENCOURAGED TO OBTAIN HIS OR HER OWN MEDICAL OR HEALTH INSURANCE COVERAGE.**

**5. Photographic Release.** Volunteer does hereby grant and convey unto Habitat all right, title, and Interest in any and all photographic images and video or audio recordings made by Habitat during the Volunteer's work for Habitat; including, but not limited to, any royalties, proceeds or other benefits derived from such photographs or recordings.

**6. Other.** Volunteer expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Minnesota, and that this Release shall be governed by and interpreted in accordance with the laws of Minnesota. Volunteer agrees that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable.

**This Release and Waiver of Liability (the "Release") is executed on** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**by** \_\_\_\_\_ **(the "Volunteer") in favor of North St. Louis County Habitat For Humanity, a Minnesota nonprofit corporation, its directors, officers, employees and agents.**

**Name (PRINT):** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

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

**Place of Worship You Attend (if any):** \_\_\_\_\_ **Are you a Thrivent Member?** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Guardian (if above is a minor):** \_\_\_\_\_ **Date:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**OVER**

**EMERGENCY MEDICAL INFORMATION**

**YOU MUST REPORT ALL INJURIES!**

In case of emergency, please contact:

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_ ALTERNATE PHONE: \_\_\_\_\_

**IMPORTANT!**

**PARENTAL PERMISSION IS REQUIRED FOR ALL MINOR CHILDREN UNDER  
AGE 18 TO WORK ON A HABITAT FOR HUMANITY WORK SITE AND  
AUTHORIZATION FOR TREATMENT OF A MINOR CHILD**

As parent or legal guardian of \_\_\_\_\_, a minor child aged \_\_\_\_\_, I hereby give my permission for my son, daughter or legal charge to participate at North St. Louis County Habitat for Humanity's house construction project. **Due to child safety laws, I understand that no person under the age of 16 may be on a construction site and those children 14 and 15 years old may participate only if the work is painting or landscaping and no actual construction is being performed simultaneously.**

I also give my authorization to North St. Louis County Habitat for Humanity emergency and medical personnel to render first aid and emergency medical care in the event of sudden illness or accident with respect to my minor child/charge.

In the event of emergency, I can be reached by phone at \_\_\_\_\_. If I cannot be reached at this number, please contact:

\_\_\_\_\_ at \_\_\_\_\_  
(NAME) (PHONE #)

Name of Parent or Guardian (PRINT) \_\_\_\_\_

Signature of Parent or Guardian \_\_\_\_\_ Date: \_\_\_\_\_