



**Release and Waiver of Liability for a Minor/Dependent**  
**Please read carefully! This is a legal document!**

This release and waiver of liability, executed on the day signed and noted below and in effect for one full calendar from this date, is in favor of Habitat for Humanity International, Inc., a nonprofit corporation, and Fremont Area Habitat for Humanity, a State of Nebraska nonprofit corporation, their directors, officers, employees, and agents (collectively "Habitat").

I and my legal child/dependent desire that my child/dependent work as a volunteer and engage in activities related to being a volunteer. I understand that the activities may include constructing and rehabilitating residential buildings and working in the Habitat offices.

I and my child/dependent hereby freely and voluntarily, without duress, execute this Release under the following terms:

1. **Waiver and Release.** I and my child/dependent release and forever discharge and hold harmless Habitat and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from his/her work for Habitat.

We understand and acknowledge that this release discharges Habitat from any liability or claim that we may have against Habitat with respect to any bodily injury, personal injury, illness, death, or property damage that may result from my child/dependent's volunteer activities with Habitat, whether caused by the negligence of Habitat or its officers, directors, employees, or agents or otherwise. We understand that 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.

2. **Medical Treatment.** I and my child/dependent hereby release and forever discharge Habitat from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with his/her volunteer activities.
3. **Assumption of Risk.** I and my child/dependent understand that the activities include work that may be hazardous to my child/dependent, including, but not limited to, construction, loading and unloading, and transportation to and from work sites.

I and my child/dependent hereby expressly and specifically assume the risk of injury or harm in the activities and release Habitat from all liability for injury, illness, death, or property damage resulting from the activities.

4. **Insurance.** I and my child/dependent understand 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.** I and my child /dependent hereby grant and convey to Habitat all right, title, and interest in any and all photographic images and video or audio recordings made by Habitat during his/her activities with Habitat, including, but not limited to, any royalties, or other benefits derived from such photographs or recordings.

6. **Other.** I and my child/dependent expressly agree that this release is intended to be as broad and inclusive as permitted by the laws of the State of Nebraska, and that this release shall be governed by and interpreted in accordance with the laws of the State of Nebraska. I agree 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.

I execute this release as of the day and year written below.

Child/dependent (please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



I execute this release as of the day and year written below.

Parent/guardian (please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



### **Emergency Contact Information**

In case of emergency, please contact: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_