



Volunteer Waiver

Since 1981, Isles has helped families and neighborhoods build assets, restore the environment and achieve self-reliance. As a volunteer for Isles, I agree to the following terms of participation:

1. I participate voluntarily and agree to this release freely and without duress.
2. If at anytime I am assigned a task that I feel is beyond my capabilities, I am responsible to inform Isles and decline the job.
3. I understand and acknowledge that as a volunteer, services may include a broad range of activities. As used in this release, the term "Volunteer Services" is intended in its broadest sense and will include all activities of any kind, at any time and in any place that is performed by the volunteer on behalf of Isles.
4. I understand and accept that the activities listed below involve risks and I assume all responsibility for losses, costs and damages I incur as a result of my participation in the below activity.
5. I release the sponsors, organizers, volunteers and site owners (as well as their affiliates, directors, officers, trustees, employees, representatives and agents) from all actions or claims of any kind that relate to my participation in Isles' programs. I further understand that this waiver binds my heirs, administrators, executors, personal representatives and assigns.
6. I hold the sponsors, organizers and site owners harmless and indemnify them against all actions or claims with respect to any injuries, deaths or other damages resulting from my participation in Isles.
7. If I am injured while participating in Isles programs the organizers or volunteers may render medical services to me or request that others provide such services. I understand and agree that by taking such actions the organizers and/or volunteers are not admitting any liability.
8. I understand that any pictures or videos taken of me or my children/dependants during my participation in Isles programs can be used by Isles for future promotional purposes.

Activity: _____ Date of activity: _____

I have read this agreement, fully understand its terms and accept that I have given up substantial rights by signing it. Furthermore, I intend this waiver to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.

Participant's Name (please

Signature: _____ Date: _____

Address _____
(street) (city, state) (zip)

Home Phone: _____ Cell Phone: _____ Email _____

**** For Participants Under 18 Years of age (Signature of Parent/Guardian REQUIRED) :**

Parent/ Guardian's Name (Please print):

Signature: _____ Date: _____