



VOLUNTEER WAIVER OF LIABILITY

CARMEL YOUTH CENTER
Southwest corner of Torres and 4th
Post Office Box 2399
Carmel, CA 93921-2399
Ph: 831-624-3285
Fax: 831-624-0130

Thank you for volunteering! We greatly appreciate your support of our youth center through your volunteer efforts. This Release and Waiver of Liability (the "Release") by _____ (the "Volunteer") in favor of the Carmel Youth Center, a non-profit corporation, their directors, officers, employees, and agents (collectively, "CYC"). The Volunteer desires to volunteer for CYC and engage in the activities related to being a volunteer (the "Activities"). The Volunteer has read and agrees to the established guidelines.

The Volunteer hereby freely, voluntarily, and without duress executes this Release under the following terms:

Release and Waiver: Volunteer does hereby release and forever discharge and hold harmless CYC 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 Volunteer's Activities with CYC.

Volunteer understands that this Release discharges CYC from any liability or claim that the Volunteer may have against CYC with respect to any bodily injury, personal injury, illness, death, or property damage that may result from the Volunteer's Activities with CYC, whether caused by the negligence of CYC or its officers, directors, employees, or agents or otherwise. Volunteer also understands that CYC 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.

Medical Treatment: Volunteer does hereby release and forever discharge CYC from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the Volunteer's Activities with CYC.

Assumption of the Risk: The Volunteer understands that the Activities may include but are not limited to food preparation, food and/or beverage handling, working near hot surfaces, setup and break down of furniture and equipment related to the event. Volunteer hereby expressly and specifically assumes the risk of injury or harm in the Activities and releases CYC from all liability for injury, illness, death, or property damage resulting from the Activities.

Insurance: The Volunteer understands that, except as otherwise agreed to by CYC in writing CYC does not carry or maintain health, medical, workers compensation or disability insurance for any Volunteer.

Photographic Release: Volunteer does hereby grant and convey unto CYC all rights, title, and interest in any and all photographic images and video or audio recordings made by CYC and its agents during the Volunteer's Activities with CYC, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

Other: Volunteer expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of California and that this Release shall be governed by and interpreted in accordance with the laws of the State of California. 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.

Volunteer Name: _____ **Signature:** _____ **Date:** _____
Address: _____ **City:** _____ **State:** _____ **Zip:** _____
Email: _____ **Phone:** _____
Emergency Contact: _____ **Phone:** _____

***** *If the volunteer is under the age of 18 a parent or legal guardian must sign.* *****

Parent Name: _____ **Parent Signature:** _____ **Date:** _____

PLEASE FAX, MAIL OR DROP-OFF COMPLETED FORM TO THE CARMEL YOUTH CENTER