

Agreement and General Release for Adult Volunteers

Thank you for offering your time to volunteer with the Living Well Foundation. The work we do would not be possible without the help of our volunteers. Please read through the agreement below, complete the section at the bottom of the form on the other side and return the completed form to the Living Well Foundation office.

1. Voluntary Acknowledgement and Participation. I acknowledge that I have voluntarily agreed to serve as a volunteer for the Living Well Foundation. I offer to perform as a volunteer of my own volition. No one has demanded that I participate in any activity with the Living Well Foundation.

2. Nature and Scope of Services. As a volunteer, I will be contributing my time and effort to various programs of the Living Well Foundation and may perform a wide range of services. The services will be performed by me as assigned by an officer, director, employee or another volunteer of the Living Well Foundation. In the course of performing the services, I agree:

- To complete all required training and paperwork relating to my volunteer position(s).
- To disclose any physical or psychological limitations to appropriate staff before participating in any activity. Since I may be lifting, carrying, moving, or otherwise engaging in physical labor, I will be respectful of my own limitations and will inform staff immediately of any such limitations.
- To read and to obey all safety rules and regulations. In the interest of the safety of the staff and volunteers, I acknowledge that the Living Well Foundation has the right to revoke volunteer privileges if these rules and regulations are not followed.

3. No Compensation. I agree to provide my services without compensation. I will not be compensated for my efforts nor am I an agent or contractor of the Living Well Foundation. I agree that I am not and will not become an employee, partner, agent, contractor or principal of the Living Well Foundation upon execution of this agreement or the performance of the services.

4. Responsibility for My Own Acts and Omissions. I hereby agree to be legally and financially responsible and will indemnify and hold the Living Well Foundation harmless for my own acts and omissions relating to the service I am voluntarily providing to the Living Well Foundation. I acknowledge that I am responsible for providing my own medical, liability, and auto insurance during my volunteer service. I understand that I am not covered by workers' compensation nor insured by the Living Well Foundation during the performance of my volunteer duties and tasks, including when driving a vehicle.

5. Assumption of Risk. I am voluntarily participating in the activities of the Living Well Foundation with full knowledge of the risks and dangers involved and hereby agree to accept any and all risks of injury, death or damage to myself and/or my personal property.

6. Photo, Video and Audio Release. I understand that as a volunteer of the Living Well Foundation, I may be recorded on film, video or other electronic recording media. I hereby consent to such recording and to the use by the Living Well Foundation of any recorded images or other media recordings of my name and likeness ("A-V Recordings") for any purpose related to furtherance of the objectives of the Living Well Foundation.

7. **Release.** I am knowingly and voluntarily waiving the right to make any and all claims, of any nature, against the Living Well Foundation, its employees, elected officials or agents which relate to or arise out of my services provided to the Living Well Foundation.

8. **I have read this Release Agreement and fully understand that I will relinquish all claims or actions known now or in the future against the Living Well Foundation.** I am at least 18 years of age and legally competent to sign this agreement. I am signing this agreement of my own free will without the influence of a Living Well Foundation staff member.

9. **Term of Agreement.** I acknowledge that this agreement will apply to the entire term of my volunteer relationship, starting with the date I first perform volunteer duties for the Living Well Foundation, even if it pre-dates the date of this agreement, and continuing as long as I continue to be a volunteer. The use of A-V recordings containing my name and likeness may continue beyond the term that I am actively volunteering.

Volunteer Information and Acknowledgement of Terms and Safety Rules

PLEASE PRINT LEGIBLY

Printed name of Volunteer: _____

Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

Signature of Volunteer: _____ **Date:** _____

Living Well Foundation Staff Signature: _____ **Date:** _____