

# Waiver-Release & Indemnity Agreement

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I HEREBY acknowledge that I am willingly and voluntarily entering into a ministry venture with other volunteers, both skilled and unskilled, for the purpose of assisting people who are victims of a disaster. I represent that I am acting in a strictly voluntary capacity, that I am paying my own expenses and providing my own insurance, both health and property.

I understand and acknowledge that the work I will be involved in may at times be hazardous and I assume all risks associated with my involvement in this disaster relief effort. I further acknowledge that accidents may occur on or about the disaster site and traveling to and from said site, involving motor vehicles, or tool and equipment. I understand that any motor vehicle in which I may be transported will be operated by licensed drivers, who may or may not be professional drivers.

I therefore waive, release, agree to indemnify and hold harmless the (organization name), their agents, employees, representatives, directors, and volunteers with whom I may be working and the host church or organization, from any and all liability for claims, injuries, damages, losses, expenses or attorneys fees, actions or causes of actions which I have or may hereafter discover as a result of my participation in this relief effort.

I further waive, release, indemnify and hold harmless all parties herein and above mentioned from any claim, action, cause or action for damages, injuries or losses of any kind which my heirs, administrators, executors or assigns may attempt to assert on my behalf.

I further release all parties above mentioned for any losses or damage to vehicles, tools or equipment which I may own and have used in connection with this disaster site.

I understand that I am expected to provide my own insurance in the case of accident, illness or injury and that the (organization name) does not provide insurance for volunteers. Personal liability insurance is the responsibility of the volunteer.

I agree that I will not use my affiliation with the (organization name) disaster relief effort to further my own "for profit" business or business venture.

I acknowledge that this Waiver, Release and Indemnity Agreement is fully understood by me and I voluntarily enter into this agreement.

By signing this document, I grant permission to the Director of this effort to conduct a law enforcement background check, if he or she so desires.

Date:

\_\_\_\_\_  
Volunteer Signature

\_\_\_\_\_  
Printed Name of Volunteer

\_\_\_\_\_  
Printed Name of First Witness

\_\_\_\_\_  
Printed Name of First Witness

\_\_\_\_\_  
Signature of First Witness

\_\_\_\_\_  
Signature of Second Witness