## **Community Service Participant Waiver**

This waiver and release form must be completed and signed by all participants in the community service program organized by the nonprofit organization.

Full Name
Address
Phone Number
Filotie Nullibei
Email
Emergency Contact Name
Emany and Contact Phane
Emergency Contact Phone
Waiver & Release
I acknowledge and agree that my participation in this community service event is voluntary. In consideration of being allowed to participate, I hereby release and hold harmless the nonprofit organization, its officers, employees, and agents from any and all liability, claims, and causes of action arising out of or related to any loss, damage, or injury, including death, that may be sustained by me or to any property belonging to me while participating.
I understand and assume the risks associated with the activities involved.
I have read and agree to the terms above.
Participant Signature
Date
If Participant is under 18
Parent/Guardian Consent
Parent/Guardian Name
Parent/Guardian Signature
1 dishib Saaratan Signature

Date