

Volunteer Event Release of Liability Waiver

By signing this form, you acknowledge that you have voluntarily agreed to participate in the volunteer event. You agree to release and hold harmless the organizers, their employees, agents, and sponsors from all liability for any injury, loss, or damage to person or property that may result from your participation.

Full Name

Address

Phone Number

Email Address

Event Name

Event Date



I have read and understand the terms of this waiver and release of liability.

Signature

Date

For participants under 18 years of age

This section must be completed by a parent or legal guardian.

Parent/Guardian Name

Parent/Guardian Signature

Date