

Volunteer Release and Waiver of Liability Form

This Release and Waiver of Liability (the “release”) executed on ____ of _____ , 20____ by _____ (“Volunteer”) releases Bethany-Fenwick Area Chamber of Commerce, (“The Chamber”) a nonprofit corporation organized and existing under the laws of the State of Delaware and each of its directors, officers, employees, and agents. The Volunteer desires to provide volunteer services for The Chamber and engage in activities related to serving as a volunteer _____ (insert volunteer service).

Volunteer understand that the scope of Volunteer’s relationship with The Chamber is limited to a volunteer position and that no compensation is expected in return for services provided by the Volunteer; that The Chamber will not provide any benefits traditionally associated with employment to Volunteer; and that Volunteer is responsible for his/her own insurance coverage in the event of personal injury or illness as a result of Volunteer’s services to The Chamber.

1. **Waiver and Release:** I, the Volunteer, release and forever discharge and hold harmless The Chamber and its successors and assigns from any and all liability, claims, and demands of whatever kind of nature, either in law or in equity, which arise or may hereafter arise from the services I provide to The Chamber. I understand and acknowledge that this Release discharges The Chamber from any liability or claim that I may have against The Chamber with respect to bodily injury, personal injury illness, death, or property damage that may result from the services I provide to The Chamber or occurring while I am providing volunteer services.

2. **Insurance:** Further I understand that The Chamber does not assume any responsibility for or obligation to provide me with financial or other assistance, including but not limited to medical, health or disability benefits or insurance of any nature in the event of my injury, illness, death or damage to my property. I expressly waive any such claim for compensation or liability on the party of The Chamber beyond what may be offered freely by the Chamber in the event of such injury of medical expenses incurred by me.

3. **Medical Treatment:** I hereby Release and forever discharge The Chamber from any claim whatsoever which arises or may hereafter arise on the account of any first-aid treatment or other medical services rendered in the connection with an emergency during my tenure as a volunteer with The Chamber.

4. **Assumption of Risk:** I understand that the services I provide to The Chamber may include activities that may be hazardous to me including but not limited to _____

involving inherently dangerous activities. As a volunteer, I hereby expressly assume the risk of injury or harm from these activities' and Release The Chamber from all liability for injury, illness, death or property damage resulting from the services I provide as a volunteer or occurring while I am providing volunteer services.

5. **Photographic Release:** I grant and convey to The Chamber all right, title and interests in any and all photographs, images, video, or audio recordings of me or my likeness or voice made by The Chamber in connection with my providing volunteer services to The Chamber.

6. **Other:** As a volunteer, I expressly agree that this Release is intended to be a broad and inclusive as permitted by the laws of the State of Delaware and that this Release shall be governed by and interpreted in accordance with the laws of the State of Delaware. I agree that in the event that any clause or provision of this Release is deemed invalid, the enforceability of the remaining provisions of this Release shall not be affected.

By signing below, I express my understanding and intent to enter into this Release and Waiver of Liability willingly and voluntarily.

Print Name

Signature

Date