

Centre Street Food Pantry Volunteer Release and Waiver of Liability

This Release and Waiver of Liability (the "Release") executed on _____ (date) by _____ Volunteer, or _____ Parent/Legal Guardian of _____ Volunteer under 18, ("Volunteer" or "I") releases Centre Street Food Pantry, ("CSFP"), a nonprofit corporation organized and existing under the laws of the Commonwealth of Massachusetts and each of its directors, officers, employees, agents, affiliates, successors and assigns. I desire to provide volunteer services and engage in activities related to serving as a volunteer for CSFP.

Service as Volunteer: I understand that my relationship with CSFP is limited to a volunteer position and that no compensation is expected in return for services provided by me, that CSFP will not provide any benefits traditionally associated with employment to me, and that I am responsible for my own insurance coverage in the event of personal injury or illness as a result of my services to CSFP.

Waiver and Release: I release and forever discharge and hold harmless CSFP and each of its directors, officers, employees, agents, affiliates, successors and assigns past or present (the "Released Persons") 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 CSFP. I understand and acknowledge that this Release discharges each of the Released Persons from any liability or claim that I may have against any of them with respect to bodily injury, personal injury, illness, death or property damage that may result from the services I provide to CSFP or occurring while I am providing volunteer services. In addition, I understand that none of the Released Persons has any responsibility for or obligation to provide any compensation, remuneration or any other financial assistance, including but not limited to medical, health or disability benefits or insurance in the event of injury or illness.

Insurance: I understand that CSFP does not carry or assume any responsibility for providing me with medical, health, worker's compensation or disability benefits or insurance. I understand that I am expected and encouraged to have medical or health insurance coverage in effect.

Medical Treatment: I release and forever discharge each of the Released Persons for any claim which arises or may hereafter arise on account of any first aid treatment or other medical services rendered and which may fail to be rendered in connection with an emergency during my activities as a volunteer with CSFP.

Assumption of Risk: I understand that the services I provide to CSFP may include activities that are inherently dangerous and may be hazardous to me. I am voluntarily participating in these activities with knowledge of the danger involved and I expressly assume the risk of injury or harm from these activities and release each of the

Released Persons 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 for CSFP.

Photographic Release: I grant to CSFP all right, title, and interests in any and all photographs, images, video, or audio recordings of me or my likeness or voice made by CSFP in connection with my providing volunteer services to CSFP. I also give CSFP permission to freely use my name, picture and voice in any broadcast, telecast, print account or any other account in any medium.

Other: I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the Commonwealth of Massachusetts and that this Release shall be governed by, and interpreted and enforced in accordance with, the laws of Massachusetts. I agree that in the event that any clause or provision of this Release is deemed invalid, the remaining provisions of this Release will continue in full force and effect.

By signing below, I understand that this Release and Waiver of Liability relates to surrendering and releasing valuable legal rights and I also understand and enter into this Release and Waiver of Liability willingly and voluntarily.

Signature
(Parent/Legal guardian if Volunteer under 18)

Date