

# Community Volunteer Liability Waiver and Agreement

This document explains the possible risks of volunteering and includes liability waivers, consents, and other legal agreements.

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This agreement is based upon a one-time volunteer event. As a community volunteer, it is understood that you have not been through the volunteer application process in order to provide services for an event that does not include client contact and serves the purpose of accomplishing a single task. This process is permitted to allow cautious vetting of community members that would like to serve as part of a group project. To volunteer on a regular basis beyond a single event, the volunteer must go through the volunteer application process.

By signing below, I, the volunteer (or volunteer's legal guardian), acknowledge that entry into this agreement ("Agreement") is in consideration of my participation as a volunteer, and confirm my understanding and agreement to the following:

## **Policies and Safety Rules**

I will comply with Mirror Ministries volunteer policies, safety rules, conduct expectations, and other directions. I understand that Mirror Ministries does not tolerate bullying, harassment, threatening behavior, or violence of any kind. I understand that noncompliance may result in the termination of my volunteer status.

## **Volunteer Not an Employee**

I understand that (a) I am not an employee of Mirror Ministries, (b) I will not be paid for my participation, and (c) I am not covered by or eligible for any Mirror Ministries insurance, health care, worker's compensation, or other benefits. I understand that Mirror Ministries may terminate my volunteer status at any time, for any or no reason.

## **Risks Associated with Volunteering**

Volunteering for Mirror Ministries has risks. These risks may arise in a variety of ways. They include, without limitation: my lifting heavy objects or otherwise exerting myself, handling glass, using hot or sharp objects or other tools, being exposed to dust, loud noises, and interacting with and being in the presence of other volunteers, visitors, and other people. I understand that these risks include risks of injury, illness, death, and property damage or loss, and that they may arise from my own actions or from the actions of others at or near Mirror Ministries facilities or encountered when traveling for Mirror Ministries activities offsite. I also understand that even if Mirror Ministries, I, and other persons present at Mirror Ministries facilities follow all health and safety protocols, I may still be exposed to COVID-19 or other infectious diseases.

## **Awareness and Assumption of Risk**

I understand the information above, and confirm and acknowledge that these are risks associated with volunteering. With such information and awareness, and with the recognition that other factors may create additional such risks, I knowingly, freely, and voluntarily: (a) sign up to volunteer for Mirror Ministries; (b) engage in volunteer activities; and (c) assume and accept the risks of all injury, death, property damage or loss, financial obligation, loss of privacy, loss of reputation, and all other injuries and other consequences, whether known or unknown, whether foreseen or unforeseeable, and whether incurred at Mirror Ministries facilities or elsewhere, that may result, directly or indirectly, from my presence at Mirror Ministries facilities or participation as a Mirror Ministries volunteer, regardless of the cause.

## **Waiver and Release of Claims**

I waive and release Mirror Ministries and its directors, officers, agents, employees, volunteers, and affiliates (collectively, "Mirror Ministries Parties") from any and all liability, claims, costs, and expenses of any kind and of whatever nature which I or my heirs, next of kin, or legal representatives may have or which may later accrue, caused by or arising directly or indirectly from my presence at Mirror Ministries facilities or participation in Mirror Ministries activities. This release and waiver includes, in each such case, all claims in respect of the risks noted above, known and unknown, foreseen and unforeseeable, regardless of the cause or whether such claims arise from tort, contract, or otherwise, and even if caused by negligence, whether passive or active. I will not sue any of the Mirror Ministries Parties on the basis of these waived and released claims.

## **Disclosure of Medical Conditions**

I understand that I am solely responsible for knowing my own physical condition and making my own decision about volunteering. I have disclosed all medications and conditions relevant to my participation to my supervisor or other staff at Mirror Ministries. I understand that Mirror Ministries needs such information because some medication side effects or medical conditions could affect my safety or that of others at Mirror Ministries. I consent to Mirror Ministries sharing this information with health professionals or first responders should I become ill or injured while at Client facilities.

**Medical Care Consent and Waiver**

I authorize Mirror Ministries to provide me with first aid and to arrange medical assistance, transportation, and emergency medical services for me if I get hurt while volunteering. I understand that Mirror Ministries is not obligated to provide this care. I also understand that I am solely responsible for any costs related to my medical treatment and transport and that Mirror Ministries does not provide health, medical, disability, or other insurance coverage for me.

**Assignment of Work Product**

I grant full rights to Mirror Ministries in any reports, brochures, website content, photos, images, videos, or other materials or works I may create in the course of volunteer activities, and any intellectual property rights in or derivatives of such materials, unless specifically authorized permission for personal rights to content are given by the Mirror Ministries Executive Director. All produced material for use will be reviewed by the Executive Director to ensure client safety protocols are followed. No media collected or produced may disclose the location of Mirror Ministries or client identities.

**Use by Client of My Name and Image**

I understand that Mirror Ministries may take photos or videos of me. I consent to use by Mirror Ministries of my image, voice, name, and story, and of images of any works I may create as a volunteer (collectively, "Materials"), in Mirror Ministries digital and print promotional, fundraising, educational, and other communications. Mirror Ministries may use the Materials without obtaining my approval or paying me for such use. I grant Mirror Ministries all copyrights in and waive any legal claims relating to the Materials, including those relating to copyright, rights of publicity or privacy, or defamation, or arising from any distortion, blurring, or alteration that may occur in the making, editing, or use of the Materials.

By checking this box means that I do not wish to agree to this consent:

**General Provisions**

I understand that this Agreement will be binding for so long as I am a volunteer at Mirror Ministries. This Agreement will run in favor of, and may be enforced by, each of the Mirror Ministries Parties, and will bind my heirs, next of kin, and legal representatives. This Agreement will be binding to the fullest extent permitted by law. If any provision of this Agreement is found to be unenforceable, the other terms remain effective.

I affirm that I am of legal age and able to sign on my own behalf and am freely signing this Agreement. **I have read this Agreement and fully understand that by signing this Agreement, I am giving up legal rights** and remedies that may be available to me and to other persons.

I affirm that I am the parent or legal guardian of the participant and am freely signing this document on their behalf. I certify that I have the authority to sign on behalf of the participant and to make decisions for the participant regarding volunteering. I also waive and release Client Parties from any and all liability, claims, costs, and damages of any kind which I may have resulting or arising directly or indirectly from the participant's participation in volunteering. **I have read this Agreement and fully understand that by signing this Agreement, I am giving up legal rights** and remedies that may be available to the participant, to me, and to other persons.

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Emergency contact name

\_\_\_\_\_  
Emergency contact phone

\_\_\_\_\_  
Signature (of parent/guardian, if applicable)

\_\_\_\_\_  
Participant name (if parent/guardian signs)

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
State, Zip Code

\_\_\_\_\_  
Email

\_\_\_\_\_  
Phone