

Volunteer Waiver

Effective Date ____/____/____

Name of Volunteer _____

Located at _____

Phone Number _____

Email: _____

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Organization It Takes a Village Okotoks Community Foundation

Located at 203 Downey Place

Okotoks, Ab T1S 1H3

Phone Number (403) 990-8873 or (587) 432-8319 (Rachel Swendseid or Bethany White)

Email: volunteer@takesavillageokotoks.com

I, the above listed Volunteer, desire to work as a volunteer for the Organization and engage in the activities related to being a volunteer for a work project.

I hereby voluntarily, execute this Volunteer Waiver under the following terms:

I, the Volunteer, release and hold harmless the Organization, its successors and assigns, and the employees, contractors, volunteers and invitees of each entity (collectively, the "Organization Group"), from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from my volunteer work with the Organization.

I understand that this Waiver discharges the Organization Group from any liability or claim that I, the Volunteer, may have against the Organization Group with respect to bodily injury, personal injury, illness, death, or property damage that may result from performing volunteer services for the Organization. I also fully understand that the Organization does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health or disability insurance, in the event of injury, illness, death or property damage.

I, the Volunteer, understand that I expressly waive any such claim for compensation or liability on the part of the Organization beyond what may be offered freely by the representative of the Organization in the event of such injury or medical expense.

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I hereby release the Organization from any claim whatsoever which arises or may arise in the future on account of any first aid treatment or other medical services that are conducted in connection with an emergency during my time with the Organization.

I understand that my time with the Organization may include various activities that may be hazardous to me and I hereby expressly and specifically assume the risk of injury or harm in these activities and release the Organization from all liability for injury, illness, death, or property damage resulting from the activities of my time with the Organization.

I grant unto the Organization all right, title, and interest in any and all photographic images and video or audio recordings that are made by the Organization during my work with the Organization, including, but not limited to, any royalties, proceeds, or other benefits that are derived from such photographs or recordings.

Legal interpretation of this Agreement shall be governed by the laws of the Province of Alberta, Canada. This Waiver and volunteer work provided hereunder shall be subject to all laws, rules and regulations pertaining to the locations(s) where such work is performed. I agree that in the event that any clause or provision of this Waiver shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable. Should any clause in this Waiver become or be found to be illegal or unenforceable for any reason, such provision must first be modified to the extent necessary to make the provision legal and enforceable and then, if necessary, such provision shall be severed from the remainder of the Waiver to allow the Waiver to remain in full force and effect.

Volunteer's Signature

Date

Print Volunteer's Name