

**Important:** Participants in the events listed below, aged **18 & older**, must have a signed Waiver of Liability on file. Please complete and bring this form **with you** to the site on your scheduled workday. Please print legibly! Please read before signing, as this **legal document** constitutes your agreement as a volunteer and the understanding of your working relationship with Westside Ministries, Inc.

This Release and Waiver of Liability (the "Release") executed by the "participant" in favor of Westside Ministries, Inc. a non-profit corporation organized and existing under the laws of the State of New York, USA, its directors, officers, employees, volunteers and agents (collectively, "WSM").

I, the Participant, desire to participate with Westside Ministries, Inc. in a construction project, and engage in the activities related to being a participant of any of the events checked below. I understand that the activities may include but are not limited to, walking, construction, being transported to and from event site locations, consuming food, working in the Westside Ministries, Inc office or housing properties and other participator related activities.

I hereby freely and voluntarily, without duress, execute this Release under the following terms.

1. **Waiver and Release.** I, the participant, release and forever discharge and hold harmless Westside Ministries, Inc. from any claim or liability that I, the Participant, may have against Westside Ministries, Inc with respect to any bodily injury, personal injury, illness, death or property damage that may result from the participation with a construction project. I also understand that Westside Ministries, Inc. does not assume and 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 (see insurance requirements below).
2. **Insurance.** I, the Participant, understand that WSM does not carry or maintain, and expressly disclaims responsibility for providing any health, medical or disability coverage for the Participant.

**EACH VOLUNTEER IS EXPECTED AND ENCOURAGED TO ARRIVE AT CONSTRUCTION PROJECTS WITH MEDICAL OR HEALTH INSURANCE COVERAGE IN EFFECT.**

3. **Medical Treatment.** Except as otherwise agreed to by WSM in writing, I hereby release and forever discharge WSM from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during my time with WSM.
4. **Assumption of Risk.** I understand that my time with WSM may include activities that may be hazardous to me, including, but not limited to, construction activities, loading and unloading or heavy equipment and materials, and local transportation to and from the event sites. So, I recognize and understand that my time with WSM may, in some situations, involve inherently dangerous activities. I hereby expressly and specifically assume the risk of injury or harm in their activities and release WSM from all liability for injury, illness, death or property damage resulting from the activities of my time with WSM.
5. **Photographic Release.** I hereby grant to WSM, its legal representatives, successors and assigns, irrevocable permission to take and to copyright, in its own name or otherwise, and re-use, publish and republish photographic portraits, pictures or similar images of likenesses (collectively, the "Pictures") of me and my children and/or other minors for which I am legally responsible, including, without limitation, any other Pictures in which I or they may be included, in whole or in part, composite or distorted in character or form, without restriction as to changes or alternations, in conjunction with my own or fictitious name(s), or reproductions thereof in color or otherwise, made through any medium, and in any and all media now or hereafter known for illustration, promotion, art, editorial, advertising, trade, and any other purpose whatsoever. I also consent to the use of any published matter in connection therewith. The Pictures may be published in any manner, including advertising, periodicals, trade show exhibits and other promotional applications. Furthermore, I will hold harmless WSM, its representatives, successors and assigns, from any liability arising from or in connection with the aforementioned Pictures.
6. **Other.** If there is any violation of this agreement and WSM is sued, or a claim is made against WSM, I agree to indemnify Westside Ministries, Inc. and hold them harmless from any and all expense and liability. Such indemnity shall cover all reasonable expenses incurred by them, including, but not limited to attorney fees.

I HAVE CAREFULLY READ THIS ASSUMPTION OF RISK, RELEASE OF LIABILITY, AND RELEASE AGREEMENT AND I FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN ME AND WESTSIDE MINISTRIES, INC.

IN WITNESS WHEREOF, Volunteer has executed this Release as of: \_\_\_\_\_ (today's date)

Participant Name: \_\_\_\_\_

Signature of Participant: \_\_\_\_\_

(If Participant is a minor) Signature of Parent/Guardian: \_\_\_\_\_



**WSM**  
Westside Ministries, Inc

**PARTICIPANT LIABILITY RELEASE FORM**  
PLEASE COMPLETE AND BRING THIS FORM WITH YOU  
TO THE SITE ON YOUR SCHEDULED WORKDAY.

<b>Full Name:</b>		<b>Cell:</b> ( ) -
<b>Email:</b>		<b>Would you like to receive our weekly volunteer update? Yes <input type="checkbox"/> No <input type="checkbox"/></b>
<b>Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Zip:</b>

**In case of emergency, please contact:**

<b>Name:</b>		<b>Relationship:</b>	
<b>Home Phone:</b> ( ) -	<b>Work:</b> ( ) -	<b>Cell:</b> ( ) -	

**Do you have any health constraints in doing physical work in rehab conditions?**

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**I understand that I am working in a Christian ministry. I am comfortable being seen as a representative of Westside Ministries while working here:** (initial)\_\_\_\_\_

**I certify that I am a legal resident of the United States:** (initial)\_\_\_\_\_

**I certify that the answers given are true and complete to the best of my knowledge. I agree that any omissions or misstatements are grounds for rejection of my application and termination of my relationship with Westside Ministries – Housing.** (initial)\_\_\_\_\_