

VOLUNTEER WAIVER AND PHOTO RELEASE FORM

This form must be completed and signed by the volunteer or a parent/legal guardian if the volunteer is under age 18.

Volunteer Name: _____

Address: _____

Phone: _____

Emergency Contact Name: _____

Phone: _____

Parent or Legal Guardian Email: _____
(required if Volunteer is under age 18)

In consideration of being allowed to participate in Little Traverse Conservancy, Inc. (hereafter "LTC") volunteer activities, including any activities incidental to such participation ("Volunteer Activities"), the Volunteer (hereafter referred to using "I", "me", or "my") agrees not to sue LTC and hereby releases LTC from all present and future claims that may be made by me, my family, estate, heirs, or assigns for property damage, personal injury, or wrongful death in any way arising as a result of my participation in the Volunteer Activities wherever, whenever, or however the same may occur. All references to LTC herein includes all of its officers, trustees, employees, subcontractors, sponsors, agents and other volunteers.

I represent that, to my knowledge, I am in good health and suffer no physical impairment that would or should prevent my participation in Volunteer Activities.

I understand that participation in the Volunteer Activities involves certain risks, including, but not limited to, property damage, serious injury and death. I am voluntarily participating in the Volunteer Activities with knowledge of the danger involved and I agree to accept all risks of participation, including, but not limited to, risks associated with operating vehicles and equipment, use of power tools, ladders, hand tools, and other equipment, manual labor and exertion, carrying objects, walking or working on uneven terrain and exposed to the hazards of the natural environment.

I understand and agree that LTC is not responsible for any property damage, personal injury or death arising out of the Volunteer Activities. I also agree to indemnify and hold LTC harmless from all claims in any way associated with my participation in the Volunteer Activities.

If I am injured so as to require emergency medical treatment, I authorize, but do not mandate LTC to provide, emergency medical treatment for myself. I hereby release LTC 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 in any way associated with my Volunteer Activities, or in the event that no such treatment or services are provided.

I understand that this waiver releases LTC from any liability or claim that I, the Volunteer, may have against LTC and others with respect to property damage, personal injury or death in any way associated with the Volunteer Activities. I also understand that LTC does not assume any responsibility for or obligation to provide financial assistance, including but not limited to medical, health or disability insurance, in the event of injury, illness, death or property damage.

I hereby grant to LTC the absolute and irrevocable right and permission to use, publish, broadcast and/or copyright the use of Volunteer's name, voice, photograph and/or likeness, in any and all advertising, promotional, or other materials based upon or derived from the Volunteer Activities in any manner, in any media whatsoever for any and all purposes without any compensation to the Volunteer. I further agree that anything derived there from will be owned solely by LTC.

I understand that this document is intended to be as broad and inclusive as permitted by the laws of the State of Michigan and interpreted in favor of LTC, and agree that if any portion of this Agreement is invalid, the remainder will continue in full legal force and effect.

(Signature of Volunteer)

Date

I am of legal age and am freely signing this agreement. I have read this form and understand that by signing this form, I am giving up legal rights and remedies.

(Signature of Parent/Legal Guardian if Volunteer is Under 18)

Date

I am the parent or legal guardian of the Volunteer. I am of legal age and am freely signing this agreement. I have read this form and understand that by signing this form, I am giving up legal rights and remedies.