



1301 Alamance Church Rd
Greensboro, NC 27406
(336) 273-7930

Volunteer & Participants Release and Waiver of Liability Form

This Release and Waiver of Liability (the "release") executed on (date) _____ by (name of volunteer or participant) _____ releases Mount Zion Baptist Church of Greensboro, Inc. a nonprofit organized and existing under the laws of the State of North Carolina and each of its directors, officers, employees, and agents. The Volunteer/ Participant desires to provide volunteer/participant services for Mount Zion Baptist Church of Greensboro, Inc., and engage in activities related to serving as a volunteer/participant for (ministry/activity)_____.

Volunteer/Participant understands that the scope of volunteer's/participant's relationship with Mount Zion Baptist Church of Greensboro, Inc., is limited to a volunteer/participant position and that no compensation is expected in return for services provided by Volunteer/ Participant; that Mount Zion Baptist Church of Greensboro, Inc., will not provide any benefits traditionally associated with employment to Volunteer/Participant and that Volunteer/ Participant is responsible for his/her own insurance coverage in the event of personal injury or illness as a result of Volunteer's/ Participant's services to Mount Zion Baptist Church of Greensboro, Inc.

1. Waiver and Release: I, _____ (Volunteer/ Participant) and _____ (Parent/Guardian, if applicable) release and forever discharge and hold harmless Mount Zion Baptist Church of Greensboro, Inc., and its successors and assigns 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 the services I provide to Mount Zion Baptist Church of Greensboro, Inc. I understand and acknowledge that this Release discharges Mount Zion from any liability or claim that I may have against Mount Zion with respect to bodily injury, personal injury, illness, death, or property damage that may result from the services I provide to Mount Zion or occurring while I am providing volunteer/participant services.
2. Insurance: Further, I understand that Mount Zion does not assume any responsibility for or obligation to provide me with financial or other assistance, including but not limited to medical, health or disability benefits or insurance of any nature in the event of my injury, illness, death or damage to my property. I expressly waive any such claim for compensation or liability on the part of Mount Zion beyond what may be offered freely by Mount Zion in the event of such injury or medical expenses incurred by me.

- 3. **Medical Treatment:** I hereby Release and forever discharge Mount Zion 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 tenure as a volunteer/participant with Mount Zion.

- 4. **Assumption of Risk:** I understand that the services I provide to Mount Zion may include activities that may be hazardous to me including, but not limited to construction, clean-up, lifting, cleaning or raking, involving inherently dangerous activities. As a volunteer/participant, I hereby expressly assume the risk of injury or harm from these activities and release Mount Zion from all liability for injury, illness, death or property damage resulting from the services I provide as a volunteer/participant or occurring while I am providing volunteer/participant services.

- 5. **Photographic Release:** I grant and convey to Mount Zion all right, title, and interests in any and all photographs, images, video, or audio recordings of me or my likeness or voice made by Mount Zion in connection with my providing volunteer/participant services to Mount Zion.

- 6. **Other:** As a volunteer/participant, I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of North Carolina and that this release shall be governed by and interpreted in accordance with the laws of the State of North Carolina. I agree that in the event that any clause or provision of this release is deemed invalid, the enforceability of the remaining provisions of this release shall not be affected.

By signing below, I express my understanding and intent to enter into this Release and Waiver of Liability willingly and voluntarily.

Volunteer/Participant Signature

Date

[If Volunteer/ Participant is under the age of 18, a parent or guardian must sign and form should be modified accordingly.]

Signature of parent or guardian (if under 18 years old)

Date