



Underage Volunteer Waiver Form

Volunteer (“**Volunteer**”) Full Name: _____

Volunteer Birth Date: _____ / _____ / _____

Parent/Legal Guardian (“**Legal Guardian**”) Full Name: _____

Legal Guardian Phone Number: _____

Legal Guardian Email Address: _____

CHAPERONE DESIGNATION:

As Legal Guardian, I hereby give permission for Volunteer to participate in volunteer activities at Meals on Wheels Durham (“**MOWD**”). I understand that either I or a chaperone designated by me are required to be present at the facility for the entirety of the volunteer shift or volunteer event because Volunteer is under the age of 18.

- I will be coming to the MOWD office to volunteer with Volunteer.
- I will be sending a chaperone who is over the age of 18 to be at the volunteer shift/event with my Volunteer. The chaperone’s information is below

Chaperone Name (if not Legal Guardian): _____

Chaperone Phone Number: _____

Chaperone Email Address: _____

Chaperone Relationship to Volunteer: _____

STATEMENT OF LIABILITY:

Legal Guardian and/or Volunteer hereby acknowledge that MOWD is not responsible for personal injuries or property damage suffered or caused by Volunteer in connection with his or her volunteer



activities. Volunteer and/or Legal Guardian understand that, except as otherwise agreed to by MOWD in writing, MOWD does not carry or maintain health, medical or disability insurance coverage for any Volunteer. Volunteer is expected to maintain his or her own insurance covering these and other risks.

Volunteer and/or Legal Guardian do hereby release and forever discharge MOWD from any claims whatsoever that arises or may hereafter arise on account of any first aid, treatment or service rendered in connection with the Volunteer's work for MOWD.

Volunteer and/or Legal Guardian do hereby release and forever discharge and hold harmless MOWD and its successors, Board of Directors, partners, sponsors, employees, agents and other volunteers, and assigns from any and all liability, claims and demands of whatever kind or nature, either in law or in equity, which may hereafter arise from Volunteer's participation in MOWD volunteer activities.

Volunteer and/or Legal Guardian understand that this Volunteer Underage Waiver Form (this "**Form**") discharges MOWD from any liability or claim that the Volunteer and/or Legal Guardian may have against MOWD with respect to any bodily injury, personal injury, death or property damage that may result from Volunteer's work for MOWD, whether caused by the negligence of MOWD or its officers, directors, employees, agents or otherwise. Volunteer and/or Legal Guardian also understand that MOWD 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 or illness.

MEDIA RELEASE:

Volunteer and/or Legal Guardian hereby authorize MOWD to publish photographs/video/media taken of my Volunteer, and their name and likeness, for use in MOWD's print, online, and video-based marketing materials, as well as other MOWD publications.

Volunteer and/or Legal Guardian hereby release and hold harmless MOWD from any reasonable expectation of privacy or confidentiality associated with the images/video/media specified above.

Volunteer and/or Legal Guardian further acknowledge that my Volunteer's participation is voluntary and that Volunteer and/or Legal guardian will not receive financial compensation of any type associated with the taking or publication of these photographs/video/media or participation in Organization marketing materials or other Organization publications. Volunteer and/or Legal Guardian acknowledge and agree that publication of said images/media/videos confers no rights of ownership or royalties whatsoever.

Volunteer and/or Legal Guardian hereby release MOWD, its contractors, its employees, its volunteers, and any third parties involved in the creation or publication of marketing materials, from liability for any claims by each or any third party in connection with Volunteer's participation.



- I authorize MOWD to publish photographs taken of Volunteer.

Legal Guardian Initials: _____

- I do NOT authorize MOWD to publish photographs taken of Volunteer.

Legal Guardian Initials: _____

OTHER:

Volunteer and/or Legal Guardian expressly agree that this Form is intended to be as broad and inclusive as permitted by the laws of the State of North Carolina, and that this Form shall be governed by and interpreted in accordance with the laws of the State of North Carolina. Volunteer and/or Legal Guardian agree that in the event that any clause or provision of this Form 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 Form which shall continue to be enforceable.

AUTHORIZATION

Volunteer and Legal Guardian have read and understand the above statements. Legal Guardian affirms that he or she is the Legal Guardian of the child designated above.

Legal Guardian
Printed Name: _____

Legal Guardian
Signature: _____ Date: _____

Volunteer Printed
Name: _____

Volunteer Signature: _____ Date: _____