United Way of Indian River County
Day of Caring: Volunteer Release

When: Saturday, October 5, 2019 from 8:00 am to 12:00 pm

The Volunteers listed below are participating in the Day of Caring on October 5, 2019, sponsored by the United Way of Indian River County (the “Day of Caring.”) On the Day of Caring, most Volunteers will start the day at the United Way Annual Kick Off Breakfast, and then they will travel to a nonprofit or other organization to perform a variety of tasks, most of which involve manual labor, including but not limited to, moving and placing or replacing landscaping material, painting, organizing supplies or other items, constructing or repairing portions of buildings or other structures (the “Projects.”) Volunteers grant United Way of Indian River County the rights to take photographs of them and their property. Volunteers agree that United Way of Indian River County may use such photographs with or without their name and for any lawful purpose, including publicity, illustration, advertising, and web content.

The Volunteer and the parent/guardian of the Volunteer listed below if the Volunteer is under 18 (the “Volunteer”) hereby releases and indemnifies the United way of Indian River County, all agencies and sponsors that are participating in the Day of Caring, and all of the agents, employees, directors, officers, volunteers and others acting on behalf of the foregoing (collectively, the “United Way”) for any and all damages and expenses arising, directly or indirectly, out of the Volunteer’s participation in the Day of Caring.

Volunteer also certifies that s/he has consulted with his/her physician if s/he has any health condition which may adversely affect Volunteer’s health by participating in the Day of Caring. If Volunteer has any such health condition, Volunteer certifies that his/her physician has advised Volunteer that s/he may participate in the Walk without any adverse affect on Volunteer’s health. If Volunteer should suffer an injury or illness, Volunteer hereby authorizes a representative of the United Way to provide or obtain medical treatment for Volunteer and/or to have Volunteer transported to another location to provide or obtain medical treatment if the United Way in its sole discretion deems appropriate.

***All Volunteers must sign this Release, and a parent of the Volunteer must sign it if the Volunteer is 18 years of age or younger. THANK YOU!**

Print Name of Volunteer	Signature of Volunteer (or parent if Volunteer is 18 years of age or younger)