



KARIS COMMUNITY
A PLACE OF HOPE & HEALING SINCE 1976

KARIS COMMUNITY RELEASE AND WAIVER OF LIABILITY FOR VOLUNTEERS

As a volunteer at Karis Community, I certify that I am in good mental and physical condition. I understand the inherent risks of volunteering, including bodily injury or death. I understand that I risk aggravating any preexisting physical condition and that I am hereby advised to consult with a physician before engaging in any major physical exertion that may occur in providing these volunteer services.

I understand that while my volunteer services will be at the discretion of Karis, its officers, and employees, I am, nevertheless, not an employee of Karis within the meaning of the Colorado Workers' Compensation Act or for any other purpose during my performance of these volunteer services. I further understand that no employee/employer or master/servant relationship is created between myself and Karis and that I will receive no compensation for my participation as a volunteer.

In consideration of Karis allowing me to participate as a volunteer, I agree not to sue and forever release, waive and discharge Karis and its officers, employees, agents, representatives, and the various sponsoring agencies and entities (from now on referred to collectively as the "Releasees") from any liability to me or my representatives, assigns, heirs, children, dependents, spouse and relatives for any claims, causes of action, losses, judgments, costs, demands or damages that are caused by or arising from any injury to me (including death) or loss or damage to my property regardless of the cause(s) of such injury, loss or damage. I assume all risks associated with my participation as a volunteer. I agree to defend, indemnify, and hold harmless the Releasees from and against any liabilities, claims, liens, actions, causes of action, costs, or expenses of any nature whatsoever arising from any damage, loss, or injury (including death) caused by me, in whole or part, or directly associated with my actions or inactions as a volunteer.

I understand that Karis shall not be responsible for the loss or theft of personal property or damage to personal property caused by Karis employees and officers, other volunteers, or the public.

I hereby acknowledge that I have carefully read this entire document, that I fully understand its contents, that I am over the age of 18, that I am signing this document of my own free will and without coercion, and that I intend for this document to be legally binding. To the extent permitted by law, this document shall include my child or children and my capacity as guardian for my child or children if I am signing on behalf of my minor child or children who will participate as a volunteer(s).

Print Name of Signing Party

Name of Minor Child(ren) Participating (if any)

Address

City, State, ZIP

Signature

Date

Emergency Contact Name

Emergency Contact Phone Number