

Strengthening Nevada through Americorps and Volunteerism

Release and Waiver of Liability

| Name: | |
|--|---|
| Address: | |
| Phone: | |
| Emergency Contact: | |
| Relationship: | Phone: |
| site from any and all liabili | s your organization and the sponsors of the volunteer by claims, and causes of action, of whatever kind or caused by negligence) incurred in conjunction with the |
| In addition, your organizati taken for publicity purposes | on has my permission to use any photographs or videos s. |
| Signature: | |
| Date: | |
| If volunteer is under the ag | ge of 18, parent of guardian must sign here. |
| Signature: | |
| Date: | |

Name .