



### Volunteer Release and Waiver of Liability Form

This Release and Waiver of Liability executed on \_\_\_\_\_ (date) by \_\_\_\_\_ ("Volunteer") releases *Our Streets PDX*, a nonprofit corporation organized and existing under the laws of the State of Oregon and each of its directors, officers, employees, and agents. The Volunteer desires to provide volunteer services for *Our Streets PDX* and engage in activities related to serving as a volunteer.

Volunteer understands that the scope of Volunteer's relationship with *Our Streets PDX* is limited to a volunteer position and that no compensation is expected in return for services provided by Volunteer; that *Our Streets PDX* will not provide any benefits traditionally associated with employment to Volunteer; and that Volunteer is responsible for his/her own insurance coverage in the event of personal injury or illness as a result of Volunteer's services to *Our Streets PDX*.

1. Waiver and Release: I, the Volunteer, release and forever discharge and hold harmless *Our Streets PDX* and its successors and assigns from any and all liability, claims, and demands of whatever kind of nature, either in law or in equity, which arise or may hereafter arise from the services I provide to Nonprofit. I understand and acknowledge that this Release discharges *Our Streets PDX* from any liability or claim that I may have against *Our Streets PDX* with respect to bodily injury, personal injury, illness, death, or property damage that may result from the services I provide to Nonprofit or occurring while I am providing volunteer services.
2. Insurance: Further I understand that *Our Streets PDX* 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. I expressly waive any such claim for compensation or liability on the part of *Our Streets PDX* beyond what may be offered freely by *Our Streets PDX* in the event of injury or medical expenses incurred by me.
3. Medical Treatment: I hereby Release and forever discharge *Our Streets PDX* 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 with *Our Streets PDX*.
4. Assumption of Risk: I understand that the services I provide to *Our Streets PDX* may include activities that may be hazardous to me. As a volunteer, I hereby expressly assume risk of injury or harm from these activities and Release *Our Streets PDX* from all liability.
5. Photographic Release: I grant and convey to *Our Streets PDX* all right, title, and interests in any and all photographs, images, video, or audio recordings of me or my likeness or voice made by *Our Streets PDX* in connection with my providing volunteer services to *Our Streets PDX*.
6. Other: As a volunteer, I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Oregon and that this Release shall be governed by and interpreted in accordance with the laws of the State of Oregon. 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.

Signature (Or parent/guardian if under 18) \_\_\_\_\_ Date \_\_\_\_\_