



Pantry from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the Volunteer's activities with S.A.F.E. Food Pantry or with the decision by any representative or agent of S.A.F.E. Food Pantry to exercise the power to consent to medical and/or first aid treatment for Volunteer, whether adult or minor.

**3. Assumption of Risk:** Volunteer (and Guardian) understands that the activities include work that has potential for personal injury, health risks, or emotional distress to the Volunteer, including, but not limited to, lifting, working with chemical cleaning agents, and transportation to and from work location. Volunteer (and Guardian) agrees to work with full knowledge of the dangers and potential injuries involved and hereby expressly and specifically assumes the risk of injury or harm and releases S.A.F.E. Food Pantry from all liability for injury, emotional distress, illness, death, or property damage resulting from or arising out of the activities and/or Volunteer's negligence. Volunteer (and Guardian) also agrees to indemnify S.A.F.E. Food Pantry for any injuries they may cause to another's person or property while engaged in said activities, including any and all damages that may be levied against S.A.F.E. Food Pantry for such injuries and the costs of defending against any claim or lawsuit for damages (which costs shall include, but not be limited to, reasonable attorneys' fees).

**4. Insurance:** Volunteer (and Guardian) understands that, except as otherwise agreed to by S.A.F.E. Food Pantry in writing, S.A.F.E. Food Pantry does not carry or maintain health, medical or disability insurance coverage for any Volunteer. Each Volunteer is expected and encouraged to obtain his/her own medical or health insurance coverage. The Volunteer expressly agrees that he/she is not an employee of S.A.F.E. Food Pantry and acknowledges that he/she had been informed that S.A.F.E. Food Pantry does not carry workers' compensation insurance to cover injuries that may occur to the Volunteer.

**5. Photographic Releases:** Volunteer (and Guardian) grants and conveys unto S.A.F.E. Food Pantry all right, title and interest in and to any and all photographic images and video or audio recordings made by S.A.F.E. Food Pantry during the Volunteer's activities with S.A.F.E. Food Pantry, including but not limited to, any royalties, proceeds, the right of publication or other benefits derived from such photographs or recordings.

**6. Other:** Volunteer (and Guardian) expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Maryland and that this Release shall be governed by and interpreted in accordance with the laws of the State of Maryland. Volunteer (and Guardian) agrees that if there is any dispute with S.A.F.E. Food Pantry, it will be resolved by binding arbitration in the State of Maryland, based on the rules of the American Arbitration Association and Maryland law. Volunteer (and Guardian) agrees that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the

Volunteer & Guardian Initials: \_\_\_\_\_ / \_\_\_\_\_  
S.A.F.E. Food Pantry Rep Initials: \_\_\_\_\_

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invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable. Volunteer (and Guardian) agrees that they have been afforded the opportunity and encouraged to consult the attorney or legal counsel of their own choosing before signing this Release.

IN WITNESS WHEREOF, Volunteer (and Guardian) has/have executed this Release as of the day and year first above written.

Volunteer

Parent or Guardian (if applicable)

\_\_\_\_\_

volunteer signature

\_\_\_\_\_

parent / guardian signature

Age (if under 18): \_\_\_\_\_

age

Address: \_\_\_\_\_

address

Phone: \_\_\_\_\_

phone number

Email: \_\_\_\_\_

email address

Witness from S.A.F.E. Food Pantry:

\_\_\_\_\_

witness signature

Volunteer & Guardian Initials: \_\_\_\_\_ / \_\_\_\_\_  
S.A.F.E. Food Pantry Rep Initials: \_\_\_\_\_

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