



Youth Participant Liability Release Form

Please read before signing, as this constitutes the agreement as a volunteer and the understanding of your child's working relationship as a volunteer with the Schoharie Area Long Term, Inc.(SALT) and partnering agencies.

I,* _____, acknowledge and state the following:

Liability: My child has chosen to travel and volunteer to perform clean-up/construction work designed to repair disaster damage in connection with SALT's efforts

I understand that this work entails a risk of physical injury and often involves hard physical labor, heavy lifting and other strenuous activity; and that some activities may take place on ladders and building framing other than ground level. I certify that my child is in good health and physically able to perform this type of work.

I understand that my child is engaging in this project at his or her own risk. I understand that this is a "grass roots" activity to support individuals adversely affected by hurricane/flood disaster or are receiving assistance to repair or replace substandard housing. I assume all risk and responsibility for any damage or injury to my child's property or any personal injury, which he or she may sustain while involved in this project, and related medical costs and expenses.

In the event that my supervising disaster organization arranges accommodations, I understand that they are not responsible or liable for my child's personal effects and property and that they will not provide lock up or security for any items. I will hold them harmless in the event of theft or for loss resulting from any source or cause. I further understand that my child is to abide by whatever rules and regulations may be in effect for the accommodations at that time.

By my signature, for myself, my estate and my heirs, I release, discharge, indemnify and forever hold Schoharie Area Long Term, Inc. together with their officers, directors, volunteers, agents, servants and employees, harmless from any and all cause and causes of action, suits, debts, dues, sums of money, accounts, reckonings, bonds, bills, specialties, covenants, contracts, controversies, agreements, promises, variances, trespasses, damages, judgments, extents, executions, claims, and demands whatsoever, in law or in equity, arising from my child's participation in this project, and travel or lodging associated therewith, including any damages which may be caused by their negligence.

Media: I agree that SALT, its employees, or agents have the right to take photographs, videotape, or digital recordings of my child. I further consent that my child's name and identity may be revealed therein or by descriptive text or commentary. I waive any rights, claims, or interest I may have to control the use of my child's identity or likeness in whatever media used. I understand that there will be no financial or other remuneration for recording my child, either for initial or subsequent transmission or playback.

Confidentiality: I also understand that by nature of volunteering in recovery work my child may be privileged to personal identifying information and promise to keep this information in strict confidence. My child will not disclose or share any personal identifying information with any third party, unless asked by the homeowner to do so.

***PARENT/GUARDIAN SIGNATURE** _____

DATE _____

DATES of WORK TEAM or DATES COVERED by THIS LIABILITY FORM
September 2, 2011- December 31, 2015; when signed in at the volunteer station and assigned for
work in the Schoharie area and surrounding communities.



Youth Volunteer Information

*NAME(FIRST, LAST) _____ * DATE OF BIRTH _____

*ADDRESS _____

*CITY/STATE _____ *ZIP CODE _____

* PHONE NUMBER _____ *EMAIL _____

*ORGANIZATION/CHURCH NAME _____

*SPECIAL SKILLS _____

*MEDICAL CONDITIONS OF WHICH WE SHOULD BE AWARE _____

*EMERGENCY CONTACT: *FIRST NAME _____ *LAST NAME _____

*PHONE NUMBER _____ *RELATIONSHIP _____

*WITNESS NAME (PRINTED) _____

Would you be interested in volunteering again with us? YES NO

Would you like to be added to our mailing list? YES NO

Have you or a member of your household served in the U.S. Armed Forces? YES NO

Thank you for helping with our ongoing recovery effort!