Central Minnesota Habitat for Humanity®

Serving Benton, Sherburne, Stearns, & Wright Counties
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VOLUNTEER SIGN IN SHEET AND LIABILITY WAIVER

ASSUMPTION OF RISK, RELEASE OF LIABILITY AND HOLD HARMLESS AGREEMENT:

This is a legal document. Read it carefully before signing.

I have been made aware and understand that during my participation in the building of houses and in those activities associated with the building of houses, including clerical or office work ("the Work Activities") conducted by the Central MN Habitat for Humanity ("Habitat"), and in travel to participate in the Work Activities, I will be exposed to many risks and dangers. I understand that these risks include, but are not limited to, death, serious neck and spinal injuries which may result in partial or complete paralysis, brain damage, serious injury to internal organs, serious injury to my musculoskeletal system, loss of my hand(s), finger(s), toe(s), and leg(s), severe lacerations and cuts which may result in serious and permanent injury, and serious injury to and loss of my eye(s), sight, ear(s), hearing, or teeth, and serious injury to other aspects of my general health and well-being. I also understand that the risks in participating in the Work Activities include not only the foregoing physical injuries, but also impairment of my future abilities to earn a living, to engage in other business, social and recreational activities, and generally to enjoy life. Understanding these risks, I state that I am physically fit to participate in the Work Activities. I understand that these risks may result from certain dangers and risks which are present and which include, but are not limited to: use of building tools, materials, and equipment; falling objects from work being conducted overhead; lifting and carrying building tools, equipment and materials; falls onto the work surface or falls from elevated work areas; and the use of building materials containing hazardous chemicals or sharp or pointed surfaces. In consideration of my being permitted to participate in the Work Activities, and as a condition of the right to participate in the Work Activities, I personally assume all risks incident to such activities. I also waive, release, and forever discharge Central Minnesota Habitat for Humanity and Habitat for Humanity International and Thrivent Financial for Lutherans and any of their employees, directors, or agents from all liabilities, losses, damages, or costs or any nature which may arise in connection with my travel to or participation in any such activities (including rescue activities associated with the Work Activities), whether caused by the negligence of Habitat or its employees, directors, or agents, or caused by some other means.

I have carefully read this document and sign it voluntarily. I further state that I am over 18 years of age and am competent to sign this document. This document shall bind me, my heirs, and personal representatives.

Signature _____ Printed Name _____ Pri

Date _____ Phone Number _____ Ph

Address _____ City _____ State _____ Zip _____ Cit

Email:_____ **Employer:**_____

Parental Authorization

I am the parent or guardian of the participant who has signed above and who is under eighteen (18) years of age. I have carefully read this document, fully understand its contents, and sign it voluntarily. I agree to the hold harmless statements as printed in the above statements.

_____
Printed Name of Parent or Guardian

_____
Signature of Parent or Guardian Date

Work Site Safety Manual Acknowledgement

I acknowledge that I have received a copy of the CMHFH Work Site Safety Manual, and that I have read it and reviewed it with my supervisor, and that I understand its contents.

_____
Printed Name of Worker

_____
Signature of Worker Date

This form must be completed and returned to the work site supervisor