



## Volunteer Release of Liability and Confidentiality Agreement

Marimed Foundation (Organization) grants permission to enter Marimed Foundation’s property, identified as:

- 45-021 and 45-025 Likeke Place, Kaneohe, HI 96744;
- 47-292 Ahaolelo Road, Kaneohe, HI 96744;
- 47-440 Pulama Road, Kaneohe, HI 96744;
- SSV Makani Olu;
- Other Organization owned watercrafts (e.g., outrigger canoes, motor boats, kayaks, etc.); and,
- Organization owned vehicles,

for the sole purpose of performing volunteer work in support of the Organization.

I have read the “Volunteer Agreement” and I understand that I am volunteering my services to the Organization. I warrant that I am competent to perform the services I am offering the Organization and I agree to perform these services in a safe and reasonable manner. If I provide tools and/or equipment necessary to perform these tasks, I agree to do so without cost to the Organization.

I have no expectation of receiving any form of compensation for this or any future volunteer work for the organization. I understand that I am not in training for future employment with the organization and have no expectation of such future employment.

Furthermore, I understand:

- Youth and families participating in Marimed programs have the right to complete confidentiality;
- No photographs, videos, or other reproducible images of the faces of the youth are permitted without proper written consent; and,
- No smoking, vaping, alcoholic beverages, or illegal drugs are allowed on the Organization’s property or at activity sites at any time.

I understand that the agents of the Organization are authorized to direct and coordinate my efforts with those of other volunteers and Organization personnel. I agree to follow the directions given by Organization personnel and/or agents.

I understand my volunteer work may include youth activity support, general maintenance, chipping, painting, general cleanup, etc..

I agree to hold the Organization and its employees, personnel and agents harmless from any liability whatsoever, for any injuries, damages, claims or losses I may incur as a result of my participation as a volunteer for the Organization.

Accepted and Agreed to this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_  
Print Name of Volunteer

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Signature of Parent or Guardian (if under age 18)