

Important: All VOLUNTEER Salvation Army workers, all of whom must be aged **18 & older**, must have a signed Waiver of Liability on file. Please complete the following form and return this form to your local Salvation Army unit. Please print legibly! PLEASE READ CAREFULLY! THIS IS A LEGAL DOCUMENT!

This release and Waiver of Liability (the "Release") executed on this ______ day of _____, by

_(the "Volunteer") in favor of **THE SALVATION ARMY**, a corporation organized and

existing under the laws of the State of Washington, its members, trustees, directors, officers, employees, volunteers and agents (collectively, "The Salvation Army").

I, The Volunteer, desire to volunteer with The Salvation Army to provide emergency disaster relief or related services and engage in the activities related to offering these services. I understand that the activities may include, but are not limited to, travel to disaster sites in the United States; transportation in commercial and Salvation Army-owned vehicles; moving and lifting heavy objects; cooking and serving food; and working and inhabiting environments where I may be exposed to infectious diseases or that may be without power, sanitation, or are otherwise damaged by a disaster event.

I hereby freely and voluntarily, without duress, execute the Release under the following terms:

- 1. Waiver and Release. I, the Volunteer, release and forever discharge and hold harmless The Salvation Army from any claim or liability that I, the Volunteer, may have against The Salvation Army with respect to any bodily injury, personal injury, illness, death or property damage that may result from my participation in a disaster relief operation. I also understand that The Salvation Army does not assume any responsibility or obligation to provide financial or other assistance, including, but not limited to medical, health, or disability insurance, in the event of injury, illness, death or property damage (see insurance requirements below).
- 2 Insurance. The Salvation Army does not carry or maintain, and expressly disclaims responsibility for providing any health, medical, disability, workers' compensation or unemployment insurance coverage for the Volunteer. EACH VOLUNTEER IS EXPECTED AND ENCOURAGED TO CARRY PERSONAL HEALTH INSURANCE AND OTHER PERSONAL INSURANCE COVERAGE PRIOR TO REGISTERING AS A SALVATION ARMY VOLUNTEER.
- **3 Medical Treatment.** Except as otherwise agreed to by The Salvation Army in writing, I hereby release and forever discharge The Salvation Army from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered to me by Salvation Army personnel in connection with an emergency that occurs in performing volunteer services with The Salvation Army.
- **4 Assumption of Risk.** I understand that my time with The Salvation Army may include activities that may be hazardous to me, including, but not limited to, cooking and food preparation activities, loading and unloading of heavy equipment and materials, transportation to and from a disaster site, working in situations where I might be exposed to infectious diseases, including, but not limited to COVID-19 or SARS-CoV-2, and working in locations damaged by the effects of a disaster. I recognize and understand that my time with The Salvation Army may, in some situations, involve inherently dangerous activities. I hereby expressly and specifically assume the risk of injury or harm in these activities and release The Salvation Army from all liability for injury, illness, death or property damage resulting from the activities of my volunteer service with The Salvation Army.
- **5 Photographic Release.** I grant and convey unto The Salvation Army all right, title and interest in any and all photographic images and video or audio recordings made by The Salvation Army during my volunteer service for The Salvation Army, including, but not limited to, any royalties, proceeds or other benefits derived from such photographs or recordings.
- 6 Other. I understand that it is my desire to further the work of The Salvation Army by performing services as a volunteer, specifically as a volunteer in emergency disaster or related services. I undertake to perform said services as a volunteer without compensation and that, in performing said services, I acknowledge that I am not acting as an employee or independent contractor of The Salvation Army.

To express my understanding of this Release, I sign here with a witness.

| Volunteer Name (please print): | |
|--------------------------------|-------|
| Signature: | Date: |
| Witness Name (please print): | |
| Signature: | Date: |