

DAY EVENT - VOLUNTEER FORM AND RELEASE OF LIABILITY

EVENT NAME _____

EVENT DATE/LOCATION _____

Thank you for volunteering with Faith Baptist Church. We greatly appreciate your assistance and dedication in reaching children so that they would know, love, and serve Jesus Christ. Faith Baptist Church takes the safety of you and the children we serve very seriously. Before you can participate in an event, you must complete this form.

CHILD PROTECTION BACKGROUND SCREEN: In responding to any question below, you do not need to provide information that is included in a record that has been sealed or expunged. If a matter is contained in a sealed or expunged record, you may state that no such record exists.

Have you ever pled guilty, been convicted or charged by any government agency with any act of neglecting, abusing, injuring or molesting any child?
 Yes No

Have you ever been included on a child abuse/neglect registry? Yes No

Have you ever been included on a sex offender registry or treated as a sex offender? Yes No

If your answer to any of the above questions is 'Yes,' you may not serve at today's event.

RELEASE OF LIABILITY

This Release and Waiver of Liability (the "Release") is executed in favor of Faith Baptist Church of LaGrange, Inc., a Georgia not-for-profit corporation, its directors, officers, employees and agents. You desire to work as a volunteer for Faith Baptist Church and engage in the activities related to being a volunteer (the "Activities"). You understand that participation in the Activities may include strenuous physical activity, and hereby freely, voluntarily, and without duress executes this Release under the following terms:

Medical Treatment: You hereby release and forever discharge Faith Baptist Church from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with your Activities with Faith Baptist Church.

Release and Wavier: You hereby release and forever discharge and hold harmless Faith Baptist Church and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from your Activities with Faith Baptist Church. You understand that this Release discharges Faith Baptist Church from any liability or claim that you may have against Faith Baptist Church with respect to any bodily injury, personal injury, illness, death or property damage that may result from your Activities with Faith Baptist Church, whether caused by the negligence of Faith Baptist Church or its officers, directors, employees or agents or otherwise. You also understand that Faith Baptist Church does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance in the event of injury or illness.

Assumption of the Risk: You understand that the Activities may involve risk of property damage and of personal injury, illness or even death. By signing this Release of Liability, you warrant that you are fully capable of safely participating in all Activities, and you expressly assume the risk of injury or harm in the Activities and release Faith Baptist Church from all liability for injury, illness, death or property damage resulting from the Activities.

Photographic Release: You hereby grant and convey unto Faith Baptist Church all rights, title, and interest in any and all photographic images and video or audio recordings made by Faith Baptist Church during your Activities with Faith Baptist Church.

Severability. If any portion of this Agreement is determined to be invalid or unenforceable under applicable law, the remainder of this Agreement shall remain valid. You expressly agree that this Release is intended to be as broad and inclusive as permitted by the State of Georgia and that this Release shall be governed by and interpreted in accordance with the laws of the State of Georgia.

I affirm that all answers I have provided on this form are true and accurate.

Signature Date _____

Volunteer – Print Name Phone Number _____

*If volunteer is under age 18, parent/guardian must also sign and date below:

Parent/Guardian Signature Date _____

Address/City/State Email address _____

In case of emergency, please contact:Name: _____

Relationship to volunteer: _____

Phone Number: _____