



MIDWEST MISSION

DISTRIBUTION CENTER

Assumption of Risk, Waiver, & Release From Liability

FOR PERSONS UNDER EIGHTEEN (18) YEARS OF AGE, A PARENT OR LEGAL GUARDIAN MUST COMPLETE AND SIGN THE ONLINE FORM.

PLEASE READ CAREFULLY BEFORE SIGNING THE ASSUMPTION OF RISK, WAIVER, & RELEASE FROM LIABILITY FORM.

In consideration for myself and or my child's opportunity to participate as a volunteer for the Midwest Mission Distribution Center, I voluntarily agree to the following additional terms:

1. **ASSUMPTION OF RISK.** I have chosen to travel & perform volunteer labor for Midwest Mission and understand that travel or lodging associated therewith entails a risk of physical injury. that the work and activities may involve hard physical labor, possibly some heavy lifting, and other strenuous activity, and that some activities may take place on ladders and building framing other than ground level. I further understand that I have an option and obligation to decline to do any work for which I feel physically unfit. I certify that I am in good health and physically able to perform the various tasks which may be involved in volunteering at the Midwest Mission Distribution Center.
2. **RELEASE.** I understand that I am engaging in this project at my own risk and that this is a "grass roots" activity to support individuals in need. I assume all risk and responsibility for any damage and/or injury to my property or any personal injury, which I may sustain while involved in this project, and any related medical costs and/or expenses based on death, bodily injury, or property damage whether or not caused by the negligence or other fault of the parties being released. In the event that Midwest Mission Distribution Center arranges accommodations, I understand that they are not responsible or liable for my 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 I am to abide by whatever rules and regulations may be in effect for the accommodations at that time.
3. **WAIVER.** I understand that a general release shall not extend to claims, material or otherwise, which the person giving the release does not know or suspect to exist at the time of executing this release. This means, in part, that that the undersigned is releasing unknown future claims.
4. **WITHDRAWAL.** I understand that I may withdraw myself and/or my child from Midwest Mission at any time for any reason.
5. **INDEMNITY AND DEFUND.** The undersigned agrees to indemnify and defend Midwest Mission, and all of its officers, agents, servants, and employees, from any and all causes of action arising from any and all causes of action rising from myself and or my child's participation in this project, and travel or lodging associated therewith, including any damage which may be caused by their own negligence.

6. **REPRESENTATIVES.** In the event of minors in my group, I certify that I have the appropriate parental release forms necessary to allow me to act in their behalf and, by my signature on the agreement, I certify that those in my care will be bound by the same terms and conditions. I understand that it is my responsibility and not that of the supervising agency to verify these items.
7. **INSURANCE.** The undersigned understands that Midwest Mission does not carry insurance to cover any possible losses the undersigned and/or the undersigned's child may incur because of his or her voluntary participation in this program.
As a volunteer for the Midwest Mission, I understand that it is my exclusive responsibility to procure basic health and accident insurance. I acknowledge that I have fulfilled this requirement to maintain adequate health insurance. If I fail to procure basic health and accident insurance, I assume all risks, including all costs and expenses, and I agree to indemnify Midwest Mission for any expenses incurred due to any medical treatment received and promise to reimburse Midwest Mission for any and all expenses.
8. **MEDICAL CARE.** I understand and agree that Midwest Mission may not be able to provide medical personnel at all times. I hereby give my consent to have competent personnel to provide me (or my child) with medical assistance and/or treatment because of any accident or medical emergency while involved in the Midwest Mission Distribution mission trip.
9. **PROMOTIONS & RECRUITMENT.** Photos and recordings may be used for promotion & volunteer recruitment.