

“Sonny's Hot Dogs”
Volunteer Release of Liability Form

Release and Waiver of Liability executed on (date) _____ by _____ (“Volunteer”) releases Sonny's Hot Dogs or Pentecostals of Dadeville (SHD or POD), a nonprofit corporation organized and existing under the laws of the State of Alabama and each of its directors, officers, employees, and agents. The Volunteer to provide volunteer services for SHD or POD and engage in activities related to serving as a volunteer.

Volunteer understands that the scope of Volunteer’s relationship with SHD or POD is limited to a volunteer position and that no compensation is expected in return for services provided by Volunteer, that SHD or POD will not provide any benefits traditionally associated with employment to Volunteer, and that Volunteer is responsible for his/her own insurance coverage in the event of personal injury or illness as a result of Volunteer’s services to SHD or POD.

1. **Waiver and Release:** I, the Volunteer, release and forever discharge and hold harmless SHD or POD and its successors and assigns from any and all Ability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from the services I provide to SHD or POD. I understand and acknowledge that this Release discharges SHD or POD from any liability or claim that I may have against SHD or POD with respect to bodily injury, personal injury, illness, death, or property damage that may result from the services I provide to SHD or POD or occurring while I am providing volunteer services.
2. **Insurance:** Further I understand that SHD or POD does not assume any responsibility for or obligation to provide me with financial or other assistance, including but not limited to medical, health or disability benefits or insurance of any nature in the event of my injury, illness, death or damage to my property. I expressly waive any such claim for compensation or liability of SHD or POD beyond what may be offered freely by SHD or POD in the event of such injury or medical expenses incurred by me.
3. **Medical Treatment:** I hereby Release and forever discharge SHD or POD from any claim whatsoever which arises or may hereafter be on account of any first aid treatment or other medical services rendered in connection with an emergency during my tenure as a volunteer with SHD or POD.
4. **Assumption of Risk:** I understand that the services I provide to SHD or POD may include activities that may be hazardous to me. As a volunteer, I hereby expressly assume the risk of injury or harm from these activities and release SHD or POD from all liability for injury, illness, death or property damage resulting from the services I provide as a volunteer or occurring while I am providing volunteer services.
5. **Photographic Release:** I grant and convey to SHD or POD all right, title, and intense in any and all photographs, images or video recordings of me made by SHD or POD in connection with my providing volunteer services to SHD or POD.

6. **Other As a volunteer**, I expressly agree that this release is intended to be as broad and inclusive as permitted by the laws of the State of Alabama and that this Release shall be governed by and interpreted in accordance with the laws of the State of Alabama. I agree that in the event that any clause or of this Release is deemed invalid, the enforceability of the remaining of this Release shall not be affected.

By signing below, I express my understanding and intent to enter into this Release and Waiver of Liability willingly and voluntarily.

Signature

Date

If Volunteer is under the age of 18, a parent or guardian must sign.

Parent Signature

Date

Full Name

Address, City, State, zip

Contact phone number