



"Together We Cross the Bridge of Reconciliation"

Volunteer Liability Waiver Release Form

I, the undersigned _____ [Print Name] have agreed to provide volunteer labor to perform various tasks with respect to Sports Cultural Academy Foundation (SPOCUA Foundation). In consideration of my desire to serve as a volunteer in relief efforts to be conducted by SPOCUA Foundation staff, I hereby assume all responsibilities for any and all risk of property damage or bodily injury that I may sustain while participating in any voluntary relief effort, disaster exercise, or other activity of any nature, including the use of equipment and facilities of the SPOCUA Foundation.

Further, I, for myself and my heir, executors, administrators, and assigns, hereby release, waive and discharge the SPOCUA Foundation and its officers, directors, employees, employees, agents and volunteers of and from any and all claims which I or my heirs, administrators, and assigns ever may have against any of the above for, or my participation therein, and hereby waive all such claims, demands, and cause of actions.

Further, I expressly agree that this release, waiver and indemnity agreement is intended to be as broad and inclusive as permitted and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I currently have no known mental or physical condition that would impair my capability for full participation as intended or expected of me.

I confirm that I am, or that my parent/guardian is of the full age of eighteen (18) years of age.

Furthermore, I have carefully read the foregoing release and indemnification and understand the contents thereof and sign this release as my own, free act.

Signature

Print Name

Parental Signature
(If under 18, Parental Signature is required)

Date Signed

Date of Birth

Address of Volunteer

Phone Number