

# Bethel Horizons Volunteer Form

## PARTICIPANT AGREEMENT, MEDICAL RELEASE and RELEASE OF LIABILITY

**Initial below to indicate that you have read, understand, and agree to the section following your initials.**

*Parents/Guardians/Legal Representatives (in the case of minors) should initial on behalf of participating Minors after discussing each section with them, indicating that both the Minor and the Parent/Guardian/Legal Representative agree to each section.*

\_\_\_\_\_ **I state that I am not now under the influence of any controlled substance (including alcohol), and that I will not be under the influence of any such substance while volunteering at Bethel Horizons.**

I realize that volunteering while under the influence of a controlled substance would endanger others and myself. I further state that I shall not bring any controlled substance onto any volunteer sites.

\_\_\_\_\_ **I am aware that I might be photographed and/or videotaped during my participation,** and authorize such photographs and/or videotapes to be used by Bethel Horizons in training and/or promotional materials at any point in the future. I understand that my name will *not* be used and/or published in any way, and that I will *not* receive compensation for the use of such photographs and/or videotapes.

\_\_\_\_\_ **I give my consent to Bethel Horizons employees and to emergency medical personnel to treat me if they deem it to be medically necessary.** I authorize Bethel Horizons employees and sub-contractors to secure such medical advice and services as they feel necessary for my health or well-being. I give permission for emergency anesthesia and/or surgery that might be necessary due to an illness or injury occurring during my participation.

\_\_\_\_\_ **I agree to accept financial responsibility for any medical expenses and/or loss of income** not covered by my Insurance Policies that result from my participation in volunteering at Bethel Horizons.

\_\_\_\_\_ **I understand that volunteering at Bethel Horizons can be physically and emotionally demanding,** and that participating in these activities may involve risks such as walking, bending, twisting, pulling, lifting, running, jumping, climbing, swinging, increased heart or breath rates and/or physical contact with others.

\_\_\_\_\_ **I understand that although the Bethel Horizons staff will make every reasonable effort to minimize exposure to known risks, not all dangers and hazards can be prevented** (i.e. cuts, bruises, scrapes, fractures, dislocations, fatalities, etc.).

\_\_\_\_\_ **I understand that my participation is voluntary and that I have the right and the responsibility to limit my participation in any activity that I believe will compromise my safety,** and agree to notify a Bethel Horizons employee if I have safety concerns. I understand that Bethel Horizons practices the "Challenge By Choice" philosophy. This means, if I choose to physically participate in any of the volunteer activities, I voluntarily assume all risks associated with such participation.

\_\_\_\_\_ **I understand that Bethel Horizons staff has the right to deny my participation** and that it is my responsibility as a Participant to follow the instructions, guidelines and procedures established by the Facilitator(s)/Trainer(s). If, at any time, I do not understand or have not heard specific instructions given by the Facilitator(s)/Trainer(s), I realize that it is my responsibility to ask for clarification and/or assistance before any participation.

\_\_\_\_\_ **I understand and assume all dangers and risks (both known and unknown) associated with my presence at any volunteer sites and waive, release and discharge Bethel Horizons and their agents, officers and employees from any and all claims or causes of action arising from such presence or participation.** I do hereby release Bethel Horizons, and its agents, officers, and employees from any and all liability, even if arising from the negligence of the releasees. I do hereby agree to indemnify and hold harmless Bethel Horizons and its agents, officers and employees for any accidents, injury, loss or damage of property, and from any legal fees that I may ever have as a direct or indirect result of said presence or participation. This release, indemnification, and waiver shall be construed broadly to the maximum extent under applicable law.

**By signing below I am agreeing that I have carefully read and agree to all of the initialed sections above.**

Participant Signature (minors must sign)

(Please print and sign name)

Date

Parent/Guardian/Legal Representative Signature (required if participant is under 18 years of age)

Relationship

Date