

VOLUNTEER WAIVER

WAIVER OF LIABILITY AND EXPRESS ASSUMPTION OF RISK (PLEASE READ CAREFULLY)

I, _____, HEREBY CERTIFY THAT I AM AWARE OF THE INHERENT HAZARDS OF ANY VOLUNTEER ACTIVITY AND AGREE AS FOLLOWS:

1. I am volunteering my services without anticipation of payment of any kind.
2. I will perform assigned tasks that are within my physical capability to the best of my ability, and I will not undertake tasks that are beyond my ability.
3. I am familiar with the safe operation and use of equipment and tools that I may utilize in connection with this volunteer activity, and I will not undertake to use any equipment or tools with which I am unfamiliar or do not know how to operate safely.
4. I acknowledge that I have received and read appropriate instruction regarding this Event, including appropriate safety and emergency procedures, and that I fully understand those instructions and that I agree, after proper inspection, to use only the supplies, tools and equipment provided by the Event organizers.
5. I will perform only those tasks assigned, observe all safety rules, and use care in the performance of my assignments.
6. I specifically acknowledge that I am engaging in this activity as a volunteer, at my own request and risk, and not as an employee, agent, official, officer or representative of The Wetlands Institute, Inc., and further acknowledge that I am not entitled to any compensation, benefit or insurance coverage from The Wetlands Institute, Inc. or any other Event promoter or sponsor, nor will I make any such claim.
7. I understand and agree that neither The Wetlands Institute, Inc. nor any other organizers or promoters or sponsors or property owners involved in the Event, nor any of their respective employees, officers, agents or assigns (hereinafter collectively referred to as "Released Parties") may be held liable or responsible in any way for any injury, death or other damages to me or my family, heirs, or assigns that may occur as a result of my participation in this activity, or as a result of product liability or the negligence of any party, including Released Parties, whether passive or active.
8. I understand that volunteering my services involves certain inherent risks, including but not limited to, the risks of possible injury, infection or loss of life as a result of contact with needles, metal objects, burning embers or other hazardous materials found in outdoor areas, or from over-exertion or environmental conditions. Despite these risks, I still choose to proceed in such activity. I know of no physical limitation which should keep me from undertaking the activities associated with this Event. In consideration for being allowed to participate in this activity, I hereby personally assume all risks in connection with the Event for any harm, injury or damage that may befall me as a participant, including all risks connected therewith, whether foreseen or unforeseen.
9. If I should become injured while participating in the Event, I authorize any physician or surgeon licensed in the State of New Jersey to perform emergency or surgical treatment as in his or her sole judgment may be necessary. I further declare that I am eighteen and legally competent to sign this liability release, or that I have acquired the written consent of my parent or guardian. I understand that the terms herein are contractual and not a mere recital, that this instrument is a legally binding, and that I have signed this document of my own free act.
10. I agree to allow my image to be used in published materials and web sites that promote the Event or programs of The Wetlands Institute, Inc.
11. I agree to adhere to the Interim Workplace Precautionary Volunteer Guidelines for COVID-19.



1075 Stone Harbor Boulevard
Stone Harbor, NJ 08247
(609) 368-1211 Fax (609) 368-3871
www.wetlandsinstitute.org

BY THIS INSTRUMENT I DO HEREBY EXEMPT AND RELEASE ALL "RELEASED PARTIES," AS DEFINED ABOVE, FROM ALL LIABILITY OR RESPONSIBILITY WHATSOEVER FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH, HOWEVER CAUSED IN CONNECTION WITH THE EVENT OR MY PARTICIPATION THEREIN, INCLUDING NEGLIGENCE OF THE RELEASED PARTIES, WHETHER PASSIVE OR ACTIVE.

I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS LIABILITY RELEASE AND ASSUMPTION OF RISK BY READING IT BEFORE I SIGNED IT ON BEHALF OF MYSELF AND MY HEIRS.

Signature of Participant

Date

Address of Participant

E-mail Address

Phone Number

Name of Emergency Contact

Phone # for Emergency Contact

Office Use: Volunteer Waiver Entry _____

