VOLUNTEER'S RELEASE AND WAIVER OF LIABILITY VALID FROM JANUARY 1, 2022 THROUGH DECEMBER 31, 2022

PLEASE READ CAREFULLY! THIS IS A LEGAL DOCUMENT THAT AFFECTS YOUR LEGAL RIGHTS!

1.	This	Release	and	Waiver	of	Liability	("Release")	is	executed	on	this		day	of
			, 20	, by _				_, ("	Volunteer"), in	favor	of St	. Joh	n's
Un	ited M	lethodist (Churc	h, Inc., a	ı Te	xas nonp	rofit corpora	tion	, its directo	ors, o	officer	s, emp	oloyee	es,
ag	ents, a	and volunt	eers (collectiv	ely,	"St. John	ı's").							

- 2. Volunteer desires to work as a volunteer for St. John's UMC and engage in activities related to being a volunteer. Volunteer understands that the activities may include constructing and rehabilitating residential buildings or other types of buildings, working in the St. John's UMC offices, and traveling to locations where volunteer work is to be performed.
- 3. Volunteer hereby freely, voluntarily, and without duress executes this Release under the following terms:

Release and Waiver. Volunteer does hereby release and forever discharge and hold harmless St. John's UMC and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from Volunteer's activities with St. John's UMC.

Volunteer understands that this Release discharges St. John's UMC from any liability or claim that Volunteer may have against St. John's UMC with respect to any bodily injury, personal injury, illness, death, or property damage that may result from Volunteer's activities with St. John's UMC, whether caused by the negligence of St. John's UMC or its officers, directors, employees, agents, volunteers, or otherwise. Volunteer releases and agrees not to sue the St. John's UMC or any of our sub-contractors, sponsors, agents and affiliates from all present and future claims that may be made by me, my family, estate, heirs, or assigns for property damage, personal injury, or wrongful death arising as a result of my participation in the Volunteer Activities wherever, whenever, or however the same may occur. Volunteer also understands that St. John's UMC does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance in the event of injury or illness.

- **4. Medical Treatment.** Volunteer does hereby release and forever discharge St. John's UMC from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with Volunteer's activities with St. John's UMC.
- **5. Assumption of the Risk.** Volunteer understands that the activities may include work that may be hazardous to Volunteer, including, but not limited to, construction, loading and unloading, and transportation to and from the work sites.
- **6.** Insurance. Volunteer understands that, except as otherwise agreed to by St. John's UMC in writing, St. John's UMC does not carry or maintain health, medical, or disability insurance coverage for any Volunteer. Each Volunteer is expected and encouraged to obtain his or her own medical or health insurance coverage.

-OVER-

- **7. Other.** Volunteer expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Texas, and that this Release shall be governed by and interpreted in accordance with the laws of the State of Texas. Volunteer agrees that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable.
- 8. By signing this Release and Waiver of Liability, I acknowledge that I have read this agreement and fully understand the intent of this agreement, and agree to be legally bound by the terms stated above.

Witness:	Volunteer:	Date:
	Ado	dress:
	DI	4.0
	Ph	one (H):
		(W):
++++++++++++++++++	+++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++
_	OLUNTEERS UNDER 18 YE	
I consent for my child, engage in volunteer work on l	behalf of St. John's UMC.	, who isyears of age, to
but not limited to, the use of p		gage in hazardous activities, including olition and working on rooftops, while lited Methodist Church, Inc.
Furthermore, I have read and its terms.	I understand the provisions c	ontained in this Release and agree to
Printed Name of Parent		Date:
Signature		

Photo/Video Release Form

I grant to St. John's United Methodist Church the right to take photographs and/or videos of me and my family. I authorize St. John's United Methodist Church, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

I agree that St. John's United Methodist Church may use such photographs and/or videos of me and my family, with or without my name, and for any lawful purpose including, for example, such purposes as publicity, illustration, advertising and web content.

I have read and understand the above.
Signature
Printed name
Names of all immediate family members to be included under this agreement (i.e. spouse and/or children)
Address:
Signature, parent or guardian (if under age 18)
Date