



UNITED WAY National Capital Area VOLUNTEER WAIVER & PHOTO RELEASE

United Way of the National Capital Area offers volunteer opportunities in Washington, DC for groups and individuals, as well as opportunities in the surrounding areas. When you get involved with United Way NCA you join the movement to improve the Health, Education and Economic Opportunity of every person in the National Capital Area. Become a part of the solution to today’s complex, interconnected issues like school graduation, poverty, food security and poor health. When you volunteer our communities grow stronger, our relationships get deeper, and we create opportunities where they didn’t exist before.

EVENT NAME: _____

EVENT DATE: _____

VOLUNTEER INFORMATION: Name (First, Last)

(PLEASE PRINT) _____

Telephone: Cell/Mobile Work Home _____

Company Name: _____

Emergency Contact (first & last name, telephone)

I UNDERSTAND THE NATURE OF THE ACTIVITY and that the Activity involves risks of serious bodily injury, including permanent disability, paralysis, cardiac arrest, drowning and death, which may be caused by my own actions, or inactions, those of other Activity participants, the conditions in which the Activity takes place, or the negligence of the “RELEASEES” named below, and that there may be other risks either not known to me or not readily foreseeable at this time. I acknowledge that if I believe any event condition is unsafe, I will immediately discontinue participation in the Activity.

I AM QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN THIS ACTIVITY.

I UNDERSTAND that any in-person activity inherently involves a risk of possible coronavirus/COVID-19 exposure and that coronavirus/COVID-19 is communicable and can cause significant harm to persons, including, but not limited to, possible death and acknowledge that RELEASEES cannot guarantee that I or any family member will not be exposed/become infected with coronavirus/COVID-19. By signing this



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agreement, I am acknowledging these risks for myself and my family members and voluntarily assuming such risks. I AGREE to follow and exercise all applicable precautions and guidelines set forth by the Centers for Disease Control and Prevention (CDC), Department of Health, and local authorities, in connection with the coronavirus/COVID-19, including, but not limited to, social distancing, wearing face coverings, and appropriate hand hygiene. I AGREE to complete any required coronavirus/COVID-19 screening prior to participating in the activity and AGREE to any required contact tracing requirements or any other disclosures required by applicable authorities.

- I FULLY ACCEPT AND ASSUME ALL RISKS AND ALL RESPONSIBILITY for all personal injury or property losses, costs, and damages I incur as a result of my participation in the activity.

- IN THE EVENT THAT I REQUIRE EMERGENCY MEDICAL PROCEDURES I specifically authorize that all treatments be given. I also understand and agree that I will be responsible for the costs of such medical procedures and treatments.

- I HEREBY RELEASE, DISCHARGE AND PROMISE NOT TO SUE United Way of the National Capital Area, its respective administrators, directors, agents, volunteers, and employees, other participants, any sponsor advertisers, nonprofit partners, and if applicable, owners and landlords of premises on which the Activity takes place (each considered one of the "RELEASEES" herein), from all liability, claims, demands, losses, or damages that I suffer which are caused or alleged to be caused in whole or in part by the alleged or actual negligence of the RELEASEES or otherwise, including negligent rescue operations.

- I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH RELEASEE from any loss, liability, damage or cost which may incur, if, despite this release and waiver of liability, and assumption of risk, I or anyone on my behalf, makes a claim against any RELEASEE.



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I HEREBY GRANT full permission to any and all of the above parties to use any photographs or other reproductions of this event for any legitimate purpose including advertising.

I READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, INDEMNITY AGREEMENT FULLY, AND UNDERSTAND ITS TERMS AND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS by signing it and have signed it freely and without any inducement or assurance of any nature. I intend to be a complete and unconditional release of all liability to the greatest extent allowed by law.

I ALSO UNDERSTAND AND AGREE that United Way of National Capital Area may subsequently use, for publicity or promotional purposes, my name, or pictures of me participating in this event without liability or obligation to me.

CONSENT TO PARTICIPATE AND RELEASE OF LIABILITY
I understand that I am participating in activities by my own choice and that I may be volunteering my services to various social service organizations. I further understand that the nature of such volunteer activities may involve physical activity, contact with unidentified/unfamiliar persons, and other potential risks of injury. With full knowledge of the risks associated with such volunteer activities, I agree to release and hold harmless UNITED WAY NCA, the organizations at which or on behalf of I am volunteering, and each of their respective employees, officers, directors, volunteers, agents, agencies, and funding sources, from all liability and responsibility pertaining to any claims, demands, and actions resulting from my participation in such volunteer activities, including claims, demands, and actions resulting from illness or injuries (physical or mental) and/or property damage (including any injury or damage caused by negligence) during my participation, that are incurred by myself and/or arising either directly or indirectly from any cause whatsoever, whether caused by UNITED WAY NCA's active or passive negligence or otherwise. I understand this release extends to claims that I do not know or do not expect to exist at the time of the signing of this Agreement. I agree to indemnify, defend, and hold harmless UNITED WAY NCA for any liability that may arise because of my negligent, criminal, willful, or fraudulent acts or omissions that occur during my participation.

PHOTO RELEASE **I prefer to opt-out of the photo release**
This photo release pertains to both UNITED WAY NCA and its third party photographer ("Photographer") if any, and their respective directors, officers, members, managers, agents,



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representatives, employees, volunteers, licensees, designees, or assigns. Without limitation or compensation, and in exchange for the possibility of having my image used by UNITED WAY NCA or Photographer, I authorize and grant UNITED WAY NCA and Photographer, today and in the future, the following unrestricted and unconditional rights and permissions: (1) to record on any media (photographic, video, digital or otherwise, with or without sound) my image, voice, and likeness (whether alone or with others) (collectively the "Photographs"); (2) to use, re-use, use commercially, publish and re-publish, display and reproduce the Photographs in whole or in part, with or without alteration or modification, individually or in connection with other images (of people, natural elements or any other imagery of any type), and in any and all manners and media, whether now known or later invented, with or without my name or a fictitious name, in any geographic territory, channel of trade or market; (3) to alter, edit, crop or retouch the Photographs without retraction; and (4) to copyright the Photographs. I understand the Photographs may be used for any and all purposes, including without limitation, exhibitions, public displays, publications, commercial art, and advertising purposes, in any media, including without limitation, on billboards or the Internet, and that the Photographs may be displayed publicly and prominently, possibly for a long time or permanently. I waive any right to inspect or approve any use of the Photographs or the rights granted in this Agreement by either UNITED WAY NCA or Photographer. I waive, release, discharge, and hold harmless UNITED WAY NCA and Photographer for any and all claims or demands arising out of or in connection with the Photographs or with UNITED WAY NCA's or Photographer's exercise of the rights and permissions granted herein, including all claims for additional compensation, claims of defamation, blurring, distortion, alteration, optical illusion, or any claims regarding rights of privacy or publicity. I understand that by releasing UNITED WAY NCA and Photographer from liability, I am giving up certain rights that I would otherwise retain. UNITED WAY NCA and/or Photographer own all rights in the Photographs, including all copyright rights, and I disclaim any rights I may have in the Photographs. This Agreement contains the entire agreement relating to the Photographs and the rights in the Photographs.

No modification of this Agreement will be valid unless agreed to in writing by UNITED WAY NCA and the above-named volunteer.

I HEREBY CONSENT AND AGREE, INDIVIDUALLY TO ALL THE TERMS AND PROVISIONS STATED ABOVE.

PRINTED NAME: (First, Last) _____

Volunteer Signature: _____

Date: _____

If Volunteer is under 18



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I HEREBY CONSENT AND AGREE, INDIVIDUALLY AND AS PARENT OR LEGAL GUARDIAN, TO ALL THE TERMS AND PROVISIONS STATED ABOVE.

PARENT NAME (first, last; please print): _____

SIGNATURE: _____