

VOLUNTEER RELEASE ACKNOWLEDGEMENT FORM

	Name:	Minor Adult (Check One) If Minor, Parent/Guardian Name: ———————————————————————————————————
	Address:	
	Phone:	
	Email: Age:	
-		("Volunteer") International Soap Box Derby"). The Volunteer desires to provide volunteer services for the Derby with
Event:		
-	on and that no compensation is expected in a sible for his/her insurance coverage in the ev	Volunteer's relationship with the Derby is limited to a volunteer return for services provided by Volunteer, and that Volunteer is ent of personal injury or illness because of Volunteer's services to
1.	<u>Waiver and Release</u> . I, the Volunteer, release and forever discharge and hold harmless the Derby, its directors, officers, employees, agents, insurers, successors and assigns from any and all liability, claims, and demands of whatsoever kind or nature which arise from my service to or activities with the Derby. I understand and acknowledge that this Release discharges the Derby from any liability or claim that I may have against the Derby with respect to bodily injury, personal injury, illness, death, or property damage that may result, arise from, or occur while I am providing volunteer services to the Derby.	
2.	<u>Insurance</u> . Further, I understand that the Derby does not assume any responsibility for or obligation to provide me with financial or other assistance, including, but not limited to, medical, health, or disability benefits or insurance of any kind in the event of my injury, illness, death, or damage to my property. I expressly waive any such claim for compensation or liability against the Derby beyond what may be offered freely by the Derby.	
3.	Assumption of Risk. I understand that the services I provide to the Derby may include activities that are hazardous to me including, but not limited to, being around or near gravity-powered cars being driven by youth. As a volunteer, I hereby expressly assume the risk of injury or harm from these activities and release the Derby from all things occurring while I am providing volunteer services.	
4.	<u>Photographic Release</u> . I grant and convey to the Derby all rights, title, and interests in any and all photographs, images, video, or audio recordings of me or my likeness made by Derby or its agents in connection with my providing volunteer services to the Derby.	
5.	Other. As a volunteer, I expressly agree that this Release is intended to be as broad an inclusive as permitted by the laws of the State of Ohio. I further agree that in the event that any clause or provision of this Release is deemed invalid, the enforceability of the remaining provisions of this Release shall not be affected.	
	By signing below, I express my understandin Form willingly and voluntarily.	g and intent to enter into this Volunteer Release Acknowledgement
Signati	ure	Date

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Printed Name