

Waiver and Release of Liability Form (FSU 'Red Squad' Volunteer)

Name	Phone	
Address	Phone 2	
Address Line 2	Requested Position	
Email	Dates/Hours of Availability	

- 1.) <u>Waiver and Release:</u> I, the undersigned, wish to volunteer as a FSU Volunteer at Fanshawe Student Union (FSU). I, the Volunteer, release and forever discharge and hold harmless FSU and its successors and assigns from any and all liability, claims, and demands of whatever kind of nature, either in law or in equity, which arise or may hereafter arise from the services I provide to FSU. I understand and acknowledge that this Release discharges FSU from any liability or claim that I may have against FSU with respect to bodily injury, personal injury, illness, death, or property damage that may result from the services I provide to FSU or occurring while I am providing volunteer services.
- 2.) <u>Insurance:</u> Further, I understand that FSU 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. I expressly waive any such claim for compensation or liability on the part of FSU beyond what may be offered freely by FSU in the event of injury or medical expenses incurred by me.
- 3.) <u>Medical Treatment:</u> I hereby Release and forever discharge FSU from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during my tenure as a volunteer with FSU.
- 4.) <u>Assumption of Risk:</u> I understand that the services I provide to FSU may include activities that may be hazardous to me. As a volunteer, I hereby expressly assume risk of injury or harm from these activities and Release FSU from all liability.
- 5.) <u>Photographic Release:</u> I grant and convey to FSU all right, title, and interests in any and all photographs, images, video, or audio recordings of me or my likeness or voice made by FSU in connection with my providing volunteer services to FSU.



I HAVE READ AND UNDERSTOOD THIS AGREEMENT, AND BY SIGNING BELOW, I EXPERSS MY UNDERSTANDING AND INTENT TO ENTER INTO THIS WAIVER AND RELEASE OF LIABILITY WILLINGLY AND VOLUNTARILY. I AM ALSO AWARE THAT BY SIGNING THIS AGREEMENT, I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS AND ASSIGNS MAY HAVE AGAINST THE FSU.

Name:	 Date:
Signature (Or parent/guardian if	 Date:
under 18):	
Witness:	 Date: