

IMPORTANT: All Port of Hoodspport Volunteers must read and sign this agreement prior to performance of any volunteer activity. No individual under the age of eighteen shall be allowed to volunteer services, nor participate with or accompany any volunteer in any volunteer capacity.

PORT OF HOODSPORT VOLUNTEER - RELEASE and WAIVER OF LIABILITY

This Release and Waiver of Liability ("Release") is executed on this _____ day of _____, in the year _____, by _____, (Volunteer) in favor or the Port of Hoodspport, a Washington port district agency and existing under that laws of the State of Washington, USA, its commission, contracted vendors, volunteers, all entities with interest in the real property within the jurisdiction of the Port of Hoodspport, collectively (POH).

Adult Volunteer First Name: _____ Last Name: _____

Email: _____ Phone: _____

Name of Event: _____

In case of emergency, please notify:

Name: _____ Relationship: _____

Phone: _____

By signing below, I affirm and agree to the following:

ASSUMPTION OF RISK: I represent and warrant that I understand (i) that participation in this program will expose me to potential injuries up to and including serious injury and/or death including, but not limited to, stings, bites, cuts, chemicals, and/or allergens to which I may have a serious or life threatening allergic reaction; (ii) the description of risks set forth herein is not complete, and that unknown and/or unanticipated risks may result in serious injury, illness, and/or death; and (iii) that volunteering is a significant personal benefit to the me and therefore provides adequate consideration for this agreement. I hereby assume all risk of injury, illness, or death related to or arising out of my participation in this program.

RELEASE, INDEMNIFICATION, AND HOLD HARMLESS: FOR AND IN CONSIDERATION OF THE PORT OF HOODSPORT ALLOWING ME TO PARTICIPATE IN THIS PROGRAM, I FOR MYSELF, MY MARITAL COMMUNITY, HEIRS, EXECUTORS, AND ASSIGNS, DO HEREBY FOREVER RELEASE, DEFEND, INDEMNIFY, AND HOLD HARMLESS THE PORT OF HOODSPORT, ITS COMMISSION, CONTRACTORS, AND INSURERS FROM AND AGAINST ALL CLAIMS, DAMAGES, DEMANDS, OR INJURIES OF ANY KIND (ANTICIPATED OR UNANTICIPATED) OR NATURE (UP TO AND INCLUDING DEATH) ARISING OUT OF OR RELATING TO MY PARTICIPATION IN THE PROGRAM.

EMERGENCY MEDICAL ATTENTION: In the event of injury or illness, I understand that reasonable effort will be made to contact my emergency contact listed above. However, I am aware that if the injury or illness appears serious and the emergency contact cannot be reached, the individual in charge will secure emergency medical care as needed.

FINANCIAL RESPONSIBILITY: I, realizing that the Port of Hoodspport does not provide insurance coverage for me, will assume financial responsibility for any cost relating to any accident or injury that might occur while I am participating in the above-named program.

GRANT OF PUBLICITY RIGHTS: I grant the Port of Hoodspport, and it's agents or assignees, the perpetual, irrevocable, royalty-free, non-exclusive, worldwide, sublicensable right and license to: (a) use, edit, reproduce, modify, portray, publish, copy, distribute, publicly display, without restriction, photographs, motion pictures, stories, depictions, names, recording or any other record of my participation in the program, including without limitation my name, voice, words, image, personality, or other likeness in any form or manner, including any electronic or non-electronic medium now known or later devised, all in connection with the Port of Hoodspport and the program for advertising, distribution, marketing, promotion, publicity, or any other lawful purpose. I waive any my right to own, inspect, approve, or receive any payment or attribution with respect to the above.

Signature _____ Date: _____