

Volunteer Event Liability Release Form

Full Name

Event Name

Event Date

Release of Liability

I acknowledge that my participation in the above event as a volunteer may involve risk of personal injury or loss. I agree, for myself and my heirs, personal representatives, or assigns, to release and hold harmless the event organizers, their officers, employees, and agents from any and all liability for injuries or damages which may arise from participation in this event.
I affirm that I am participating voluntarily and have read and understood this release.

Volunteer Signature

Date

Parent/Guardian Signature (If Under 18)

Date

Please complete all required fields before submitting or printing this form.