

Volunteer Release and Waiver of Liability for Minors

Mid-American Mission, Inc. / Woodland Acres Bible Camp
54 CR 8052 Green Forest, AR 72638

Please read carefully. This is a legal document that affects your legal rights.

This Release and Waiver of Liability, (the "Release"), executed on this _____ day of _____, 20____ by _____(the "Volunteer"), in favor of Mid-America Mission, Inc. and Woodland Acres Bible Camp, a nonprofit corporation, their directors, officers, missionaries, members of the boards of directors, and agents.

The volunteer desires to work as a volunteer for Mid-America Mission, Inc. and Woodland Acres Bible Camp (MAM-WABC) and engage in the activities related to being a volunteer. The volunteer understands that the activities may include constructing and rehabilitating structures or maintaining the grounds at its office, camp, or other program site; working in the office; or assisting with youth program or community events.

The volunteer hereby freely, voluntarily, and without duress executes this release under the following terms:

1. Release and Waiver. Volunteer does hereby release and forever discharge and hold harmless MAM-WABC 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 Volunteer's activities with MAM-WABC.

Volunteer understands that this release discharges MAM-WABC from any liability claims that Volunteer may have against MAM-WABC with respect to any bodily injury, personal injury, illness, death, or property damage that may result from Volunteer's activities with MAM-WABC, whether caused by the negligence of MAM-WABC or its officers, directors, employees, members of the board of directors, or otherwise. Volunteer also understands that MAM-WABC does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance in the event of injury or illness.

2. Medical Treatment. Volunteer does hereby release and forever discharge MAM-WABC from any claim whatsoever that arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the volunteer's activities with MAM-WABC.

3. Assumption of the Risk. The volunteer understands that the activities may include work that may be hazardous to the volunteer, including, but not limited to, construction, loading and unloading, and transportation to and from the work sites.

Volunteer hereby expressly and specifically assumes the risk of injury or harm in the activities and releases MAM-WABC from all liability for injury, illness, death, or property damage resulting from the activities.

4. Insurance. Volunteer understands that, except as otherwise agreed to by MAM-WABC, in writing, MAM-WABC does not carry or maintain health, medical, or disability insurance coverage for any Volunteer.

Each Volunteer is expected and encouraged to obtain his or her own medical or health insurance coverage.

5. Photographic Release. Volunteer does hereby grant and convey into MAM-WABC all rights, titles, and interests in any and all photographic images and video or audio recordings made by MAM-WABC, or on [MAM-WABC's] behalf, during the volunteer's activities with MAM-WABC, including but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

6. Other. Volunteer expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Arkansas and that this release shall be governed by and interpreted in accordance with the laws of the State of Arkansas. Volunteer agrees that in the event that any clause or provision of this release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this release, which shall continue to be enforceable.

IN WITNESS WHEREOF, Volunteer has executed this release as of the day and year first above written.

Witness: _____

Volunteer: _____

Parent or Guardian: _____

Address: _____(Street)

_____ (City, St & Zip)

Phone: _____(Home)

_____ (Other)

Date: _____