

CHARITY CROSSING

Volunteer Liability Release Form

Name: _____

Address: _____

Phone/Cell: _____ Email: _____

Family Member 1 _____ Family Member 2 _____

Family Member 1 _____ Family Member 2 _____

In consideration for the opportunity to participate in the "Charity Crossing Initiatives/Events" I agree as follows for myself, and for my family members who participate and/or attend with me: I hereby waive and release, for myself, my child, my heirs, executors and administrators, any and all rights, claims, liabilities, and causes of action whatsoever I or my family members may have against Charity Crossing Inc., its affiliates, operators and sponsors and each of their respective officers, directors, employees, and agents (the "Event Parties") relating to or arising from my or my family's participation in the Event, including but not limited to personal injury. I recognize that "Charity Crossing Initiatives/Events" has an inherent risk of injury and I hereby assume that risk, and on behalf of me and my family. If I or my family causes injury to any person or damage to any property while participating in the Event, I hereby indemnify and hold harmless the Event Parties from and against all claims, suits, actions, losses, damages, and expenses related to arising from such injury or damage. I hereby give my consent to Charity Crossing Inc., to use my and my families name and photographs, video and film ("Photos") of me and/or my child taken before, during, or after the "Charity Crossing Initiatives/Events" in advertising and promotional materials for Charity Crossing including but not limited to the Internet, without compensation. I agree that no advertising or other material need be submitted to me or my family for approval. I agree that all Photos of me and/or my family used by Charity Crossing Inc. and they may copyright material containing the same. I hereby release, discharge, and agree to save harmless the Event Parties from any liability, including, without limitation, any claims for libel or invasion of publicity/privacy, by virtue of any use of my or my families name and/or Photos, including, any alteration of such Photos, whether intentional or otherwise. I have read and understood this Release and Consent and declare all information is truthful and accurate

Signature: _____ Date: _____



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Contributions to CHARITY CROSSING INC are Tax-Deductible under IRC Section 170.