



Release of Waiver and Liability

This Release and Waiver of Liability (the "Release") executed on date below by the undersigned (the "Volunteer") in favor of GO Pantry, a non-profit corporation, and its directors, officers, employees and agents.

The Volunteer desires to work as a volunteer for GO Pantry and engage in the activities related to being a volunteer in the Master Provisions food center, warehouse, food drives, and/or outreach activities (the "Activities"). The Volunteer understands that the activities involve physical labor, prolonged periods of standing and bending, and are in proximity of mechanical warehouse equipment.

1. **Release and Waiver.** The Volunteer does hereby release and forever discharge and hold harmless GO Pantry and its successors and assigns from any and all liability, claims and demands of whatever kind in nature, either in law or in equity, that arise from Volunteer's Activities with GO Pantry.

VOLUNTEER UNDERSTANDS THAT THIS RELEASE DISCHARGES GO PANTRY FROM ANY LIABILITY OR CLAIM THAT THE VOLUNTEER MAY HAVE AGAINST GO PANTRY WITH RESPECT TO ANY BODILY INJURY, PERSONAL INJURY, ILLNESS, DEATH, OR PROPERTY DAMAGE THAT MAY RESULT FROM VOLUNTEER'S ACTIVITIES WITH GO PANTRY. VOLUNTEER ALSO UNDERSTANDS THAT GO PANTRY DOES NOT ASSUME ANY RESPONSIBILITY FOR OR OBLIGATION TO PROVIDE FINANCIAL ASSISTANCE OR OTHER ASSISTANCE, INCLUDING BUT NOT LIMITED TO MEDICAL, HEALTH, OR DISABILITY INJURY IN THE EVENT OF INJURY OR ILLNESS.

This release is intended to and does include a complete release of liability for any claims and injuries arising out of the negligence, gross negligence, and recklessness of any other GO Pantry volunteer or employee/agent and that, but for this agreement, said volunteer would not be granted permission to perform volunteer services, as established between the parties, for or on behalf of GO Pantry.

2. **Medical Treatment.** The Volunteer does hereby release and forever discharge GO Pantry from any claim whatsoever which arises or may hereafter arise on account of any first aid treatment or service rendered in connection with the Volunteer's Activities with GO Pantry.

3. **Insurance.** The Volunteer understands that GO Pantry does not carry or maintain health, medical or disability insurance cover for any Volunteer.

4. **Photographic Release.** The Volunteer does hereby grant and convey unto GO Pantry all right, title and interest in any and all photographic images and video or audio recordings made by GO Pantry during the Volunteer's Activities with GO Pantry including, but not limited to, any royalties, proceeds or other benefits derived from such photographs or recordings.

5. **Governing Law.** The Volunteer expressly agrees that the Release is intended to be as broad and inclusive as permitted by the laws of the Commonwealth of Kentucky. Volunteer also 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 provisions shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable.

I hereby further state I have carefully read all of the terms and conditions set forth in this waiver and release of all claims, that I fully and completely understand all information set forth herein and I voluntarily sign this waiver and release as my own free act understanding fully this is a legally binding document.

Volunteer Name _____

Date _____

Volunteer Address _____

Signature of Volunteer or
Parent/Guardian of minor volunteer _____

In the event of an emergency, I hereby designate the following individual(s) to be contacted:

Emergency Contact Name, address and telephone number (please print clearly).

