

Rural Areas Version

**RELEASE AND WAIVER OF LIABILITY
for Recipients of Disaster Relief Efforts**

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

This Release and Waiver of Liability, executed on (date) _____, by (Recipients' Name) _____, in favor of AmeriCorps St. Louis, _____ County, partnering relief organizations and their directors, officers, members and affiliates (herein referred to as "the Storm Recovery Task Force") is legally binding.

I, the Recipient, desire the Storm Recovery Task Force to engage in relief efforts and any such related activity on my property. I understand that such activities could entail (but are not limited to) collecting and piling brush and debris, home demolition and debris removal, removal of downed trees from structures/property, removal of flood-damaged personal property and simple home repair on my property. I freely and voluntarily execute this Release under the following terms:

1. RELEASE AND WAIVER. I hereby release and forever discharge the Storm Recovery Task Force and its partner organizations from any and all liability, claims and demands of whatever kind either in law or in equity, which arise or may hereafter arise from related activities with said organizations. I understand that this Release discharges said organizations from any liability or claim that I may have against the Storm Recovery Task Force to bodily injury, personal injury or property damage that may result from the Storm Recovery Task Force volunteers working on my property. I also understand that the Storm Recovery Task Force does not assume any responsibility for or obligation to provide financial or other assistance, including but not limited to property insurance in the event of damage or loss.

2. ASSUMPTION OF RISK. I understand that the Storm Recovery Task Force's work may include work on and near my property that may be hazardous, including but not limited to work with power tools and heavy limbs. I hereby expressly assume the risk of property damage and/or loss due to volunteer activities.

3. INSURANCE. I understand that the Storm Recovery Task Force does not carry or provide insurance coverage for any homeowner's personal property.

4. PHOTOGRAPHIC RELEASE. I hereby grant unto the Storm Recovery Task Force rights to any and all photographic or video images taken on/of my property, during storm-related activities, to the Storm Recovery Task Force for internal use or for reasons of publicity.

5. OTHER. I agree that this Release and Waiver is intended to be as broad and inclusive as permitted by local and state laws. I agree that in the event that any provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such provision shall not otherwise affect the remainder of this Release and Waiver, which shall continue to be held enforceable.

RECIPIENT'S SIGNATURE _____

RELEASE OF CONFIDENTIAL INFORMATION

I, (Recipient's Name) _____ authorize _____ County to release to AmeriCorps St. Louis the information maintained by _____ County that the agency considers relevant and necessary for the purpose of provision of assistance and to avoid duplication of benefits.

I, (Recipient's Name) _____ authorize AmeriCorps St. Louis to release information that is considered relevant and necessary for the purpose of determining assistance to other agencies involved in disaster relief.

I further understand that the release of this information does not guarantee that assistance will be provided, but that without this release _____ County cannot provide information to AmeriCorps St. Louis to assist with your disaster related needs.

RECIPIENT'S SIGNATURE _____

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

Collected by: _____ on ____/____/____ at ____am/pm