

## **World Impact Volunteer Release and Waiver of Liability and Indemnity Agreement (B)**

In consideration of being permitted to volunteer at any World Impact, Inc. (or World Impact, Inc. subsidiaries) activity or enter onto the property of or into any facility for any purpose, including, but not limited to observation, use of facilities or equipment or participation in any way, or being transported to or from an activity the undersigned hereby acknowledges, agrees and represents that he or she has or immediately upon entering will, inspect such premises, activities or facilities. It is further warranted that such entry onto World Impact's property for observation, participation or use of any facilities or equipment constitutes an acknowledgment that such premises, activities, and all facilities and equipment thereon have been inspected and that the undersigned finds and accepts same as being safe and reasonably suited for the purposes of such observation, use, or participation.

In further consideration of being permitted to attend any World Impact activity or enter onto World Impact property for any purpose including, but not limited to observation, use of facilities or equipment, or participation in any way, the undersigned hereby agrees to the following:

The undersigned hereby releases, waives, discharges, and covenants not to sue World Impact, Inc. or any of World Impact's subsidiaries, board of directors, employees, agents, or other volunteers (hereinafter referred to as 'releasees') from all liability to the undersigned for any loss or damage, and any claim or demands therefor on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releasees or otherwise, while the undersigned is in, upon, or about the premises or any facilities therein, or involved in any activity carried out by the releasees.

The undersigned hereby agrees to indemnify and save and hold harmless the releasees and each of them from any loss, liability, damage or cost they may incur due to the activity or presence of the undersigned in any of the releasees activities or in any way observing or using any facilities or equipment of the releasees including transporting to or from an activity whether caused by the negligence of the releasees, or otherwise.

The undersigned hereby assumes full responsibility for and risk of bodily injury, death, or property damage due to the negligence of releasees or otherwise while involved in any activity or the releasees or in, about or upon the premises of the releasees and/or while using the premises or any facilities or equipment hereon, including transportation to or from an activity.

The undersigned further expressly agrees that the foregoing release, waiver, and indemnity agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

The undersigned has read and voluntarily signs the release and waiver of liability and indemnity agreement, and further agrees no oral representations, statements or inducement apart from the foregoing written agreement have been made.

The undersigned understands that the above release and waiver of liability and indemnity agreement applies to any minor under custodial care whose name(s) is( are) listed below. The undersigned further gives permission for any child listed below to be transported to and from any activity.

Should a practicing doctor deem it necessary, in case of illness or injury, World Impact (or its subsidiaries), or any of its staff, has full consent of the undersigned to give consent for all medical treatment, including surgery for the undersigned or for any minor listed below.

I understand that I am volunteering and am not covered by Workmen's Compensation nor by any of the releasees' agents.

I HAVE COMPLETED THE INFORMATION ON THE BACK SIDE COMPLETELY AND HAVE READ THIS RELEASE.

----- Date: -----  
Signature of Applicant Printed Name of Applicant

**Volunteer Release and Waiver of Liability and Indemnity Agreement (B) – (Continued)**

**FAMILY INFORMATION** (Please Print)

-----  
Applicant's Printed Name (Applicant must be parent or legal guardian of children listed below) -----  
----- (Relationship to Children) -----

-----  
Address ----- Daytime Phone Number ----- Night Phone Number -----

-----  
City ----- State ----- Zip code -----

Name of minor child(ren)

	<u>Name</u>	<u>Birth date</u>	<u>Allergies</u>	Social Security No.
1.	-----	-----	-----	-----
2.	-----	-----	-----	-----
3.	-----	-----	-----	-----
4.	-----	-----	-----	-----
5.	-----	-----	-----	-----

**INSURANCE INFORMATION** (Please Print)

Name of Insured ----- Social Security No. -----

Family doctor: ----- Phone number: -----

Insurance Company: -----

Medical/Medicare/insurance number: -----

Employer's Name: -----

Employer's Telephone Number: -----

**EMERGENCY INFORMATION**

If parent or guardian can not be reached contact: (Please Print)

Primary Contact: ----- Relationship: -----

Day Phone: ----- Night Phone: -----

Secondary Contact: ----- Relationship: -----

Day Phone: ----- Night Phone: -----