



Volunteer Form

Name: _____

Phone Number: _____

Email: _____

Days Available to Help:

Friday for Set-up

Saturday, position and times to be determined

Sunday for Take-down

More than One day

Volunteer Release and Waiver of Liability

As a volunteer at the Grande Prairie Highland Games, I understand I am assuming the risk of injury, and holding harmless, the Grande Prairie Highland Games Association (further named Association)

1. Waiver and Release: I, the Volunteer, release and forever discharge and hold harmless Association 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 the services I provide to Association. I understand and acknowledge that this Release discharges the Association from any liability or claim that I may have against the Association with respect to bodily injury, personal injury, illness, death, or property damage that may result from the services I provide to the Grande Prairie Highland Games, or that may occur while I am providing volunteer services.

2. Insurance: My volunteer efforts are a donation to the betterment and support of the Highland Games in Grande Prairie and I understand that the Highland Games Association of Grande Prairie does not assume any responsibility for or obligation to provide me with financial or other assistance, including but not limited to medical, health, or disability benefits or insurance. I expressly waive any such claim for compensation or liability on the part of the Association beyond what may be offered freely by Association in the event of injury or medical expenses incurred by me. Should I be injured in any way during my service as a volunteer at the 2020 Grande Prairie Highland Games, I agree to waive any



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rights I may have to litigate or pursue compensation from the Grande Prairie Highland Games Association.

3. Medical Treatment: I hereby Release and forever discharge the Association from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during my tenure as a volunteer with Association.

4. Photographic Release: I grant and convey to the Association all right, title, and interests in any and all photographs, images, video, or audio recordings of me or my likeness or voice made by Association in connection with my providing volunteer services to Association.

By signing below, I express my understanding and intent to enter into this Release and Waiver of Liability willingly and voluntarily.

Name (Print)
Signature (Or parent/guardian if under 18)
Date