Redstick Cares 501(c)(3)
5475 Essen Lane, Baton Rouge La 70809
225-351-CARE (2273)
www.RedstickCares.org
EIN 88-3879331

This Release and Waiver of Liability (the "release") executed on _____ (date) by _____ ("Volunteer") releases Redstick CARES (also referred as RSC) a nonprofit corporation organized and existing under the laws of the State of Louisiana and each of its directors, officers, employees, and agents. The Volunteer desires to provide volunteer services for RSC and engage in activities related to serving as a volunteer. Volunteer understands that the scope of Volunteer's relationship with RSC is limited to a volunteer position and that no compensation is expected in return for services provided by Volunteer; the RSC will not provide any benefits traditionally associated with employment to Volunteer; and that Volunteer is responsible for his/her own insurance coverage in the event of personal injury or illness as a result of Volunteer's services to RSC.

1. **Waiver and Release**: I, release and forever discharge and hold harmless RSC 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 RSC. I understand and acknowledge that this Release discharges Redstick CARES from any liability or claim that I may have against RSC with respect to bodily injury, personal injury, illness, death, or property damage that may result from the services I provide to RSC or occurring while I am providing volunteer services.
2. **Insurance**: Further I understand that Redstick CARES 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 RSC.
3. **Medical Treatment:** I hereby Release and forever discharge Redstick CARES 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 RSC.
4. **Assumption of Risk**: I understand that the services I provide to Redstick CARES may include activities that may be hazardous to me including, but not limited to driving, lifting, pushing, pulling, use of cleaning chemicals, etc. involving inherently dangerous activities. As a volunteer, I hereby expressly assume risk of injury or harm from these activities and Release RSC from all liability.
5. **Photographic Release**: I grant and convey to Redstick CARES all right, title, and interests in any and all photographs, images, video, or audio recordings of me or my likeness or voice made by RSC in connection with my providing volunteer services to RSC.
6. **Other**: As a volunteer, I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Louisiana and that this Release shall be governed by and interpreted in accordance with the laws of the State of Louisiana.

I agree that in the event that any clause or provision of this Release is deemed invalid, the enforceability of the remaining provisions of this Release shall not be affected. By signing below, I express my understanding and intent to enter into this Release and Waiver of Liability willingly and voluntarily.

_____ _____

Signature (Or parent/guardian if under 18) Date

FIRST TIME VOLUNTEERS, please complete this form.

VOLUNTEER INFORMATION:
Name: _____
Birthdate _____
Mailing Address
_____
City _____State _____ZIP _____

Phone: _____
E-mail Address: _____

Are you part of a volunteer group? Y N Company/group Name: _____

t-shirt size: _____ Shirts will be awarded after the fifth volunteer commitment.

Emergency Contact: _____ Contact Relationship: _____
Emergency Phone Number: _____

Primary communication to volunteers is through the website calendar sign-up regarding Redstick CARES Volunteer Opportunities.

Volunteer Expectations Agreement 1. Volunteers working in any capacity within Redstick CARES must be at least 10 years of age. 2. If any task causes you discomfort, or if you feel it is unsafe or unhealthy to perform a specific task, report the condition to a staff member immediately. 3. Wear sensible, appropriate clothing and footwear for the task(s) at hand. 4. Wash hands before beginning your shift, after eating, and after using the restroom. 5. Alcohol and other drugs are prohibited. 6. No Smoking policy – Smoking allowed behind the building only. 7. Only authorized personnel may operate machines or equipment. 8. Report any injury immediately to Redstick CARES staff on site. 9. Please avoid conversations, comments and language that are non-inclusive or inappropriate in a professional workplace.

I have read the Volunteer Expectations Agreement _____ Yes

Signature _____ Date_____