

Working to sustain the natural environment to ensure our Islands' way of life

## VOLUNTEER MUST COMPLETE THE VOLUNTEER RELEASE AND WAIVER OF LIABILITY FORM

PARENT/LEGAL GUARDIAN SIGNATURE IS REQUIRED IF VOLUNTEER IS UNDER THE AGE OF 18

Volunteer Name:
Check here if Volunteer is under age 18
Contact E-mail (required):
Parent or Legal Guardian Email (required if Volunteer is under age 18):
Address:
Phone:
Emergency Contact:
Name:
Relationship to Participant:
Phone Number



Working to sustain the natural environment to ensure our Islands' way of life

## RELEASE AND WAIVER OF LIABILITY FORM

This release and Waiver of Liability is executed on (date)	
(Volunteer Name)	("Volunteer") releases the Mariana
Islands Nature Alliance (MINA) ("Nonprofit"), a nonprofit corporation or	ganized and existing under the laws
of the Commonwealth of the Northern Mariana Islands (CNMI) and each	of its directors, officers, employees,
and agents. The Volunteer desires to provide volunteer services for MINA	A and engage in activities related to
serving as a volunteer member or worker.	

Volunteer understands that the scope of Volunteer's relationship with MINA is limited to a volunteer position and that no compensation is expected in return for services provided by Volunteer; that MINA 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 and illness as a result of Volunteer services to MINA.

- 1. Waiver and Release: I, the Volunteer, release and forever discharge and hold harmless MINA and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from the services I provide to MINA. I understand and acknowledge that this Release discharges MINA from any liability or claim that I may have against MINA with respect to bodily injury, personal injury, illness, death, or property damage that may result from the services I provide to MINA or occurring while I am providing volunteer services.
- 2. <u>Insurance:</u> Further, I understand that MINA 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 of any nature in the event of my injury, illness, death or damage to my property. I expressly waive any such claim for compensation or liability on the part of MINA beyond what may be offered freely by MINA in the event of such injury or medical expenses incurred by me.





## Working to sustain the natural environment to ensure our Islands' way of life

3. Medical Treatment: I hereby Release and forever discharge MINA from any claims whatsoever

	which arises or may hereafter arise on account of any first-aid treatment or other medical serv		
	rendered in connection with an emergency during my tenure as a volunteer with MINA.		
4.	Assumption of Risk: I understand that the services I provide to MINA may include activities that		
	may be hazardous to me including, but not limited to		
	(specify known dangerous activity, such as		
	"construction work" or hazardous activities) involving inherently dangerous activities. As a		
	volunteer, I hereby expressly assume the risk of injury or harm from these activities and Release		
	MINA from all liability for injury, illness, death or property damage resulting from the services I		
	provide as a volunteer or occurring while I am providing volunteer services.		
5.	5. Photographic Release: I granted and convey to MINA all rights, title, and interests in any ar		
	photographs, images, video, or audio recordings of me or my likeness or voice made by MINA in		
	connection with my providing volunteer services to MINA.		
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 Commonwealth of the Northern Mariana Islands and that this Release		
	shall be governed by and interpreted in accordance with the laws of the Commonwealth of the		
	Northern Mariana Islands. 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	g below, I express my understanding and intent to enter into this Release and Waiver of Liability		
willingly a	and voluntarily.		
** (If Volu	unteer is under the age of 18, a parent or guardian must sign)		
Signature	Date		
~15.1141410			