



# Volunteer Waiver

(Required)

RELEASE OF LIABILITY, WAIVER OF CLAIMS AND ACCIDENTS, ASSUMPTION OF RISKS. BY SIGNING THIS DOCUMENT, YOU WILL WAIVE CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE. PLEASE READ CAREFULLY.

**VOLUNTEER NAME:** \_\_\_\_\_

**BIRTHDATE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_

### ASSUMPTION OF RISKS

I am aware that volunteering in the activities of the field projects with MakeWay Charitable Society – Atl'ka7tsem/Howe Sound Marine Stewardship Initiative involves risks, dangers and hazards associated with field biology including, but not limited to: accidents associated with travel to and from the research area and between field sites; accommodation; injuries associated with working in managed and unmanaged forests of all ages and types; drowning and other water related accidents; allergic reactions; poisonous plants; hypo- and hyperthermia; infectious viral, bacterial and fungal diseases; and risk of attack from wild and domestic animals. I freely accept and fully assume all such risks, dangers and hazards and the possibility of personal injury, death, property damage and loss resulting there from.

### RELEASE OF LIABILITY, WAIVER OF CLAIMS

In consideration of MakeWay Charitable Society – Atl'ka7tsem/Howe Sound Marine Stewardship Initiative permitting me to volunteer in the activities of the field projects and permitting my use of project vehicles, equipment, facilities, and services I hereby agree as follows:

1. **To waive any and all claims** that I have or may in the future have against MakeWay Charitable Society – Atl'ka7tsem/Howe Sound Marine Stewardship Initiative, their directors, officers, employees, contractors, volunteers, sponsors, agents and representatives (all of whom are hereinafter collectively referred to as “**the Releasees**”) and **to release the Releasees** from any and all liability for any loss, damage, injury or expense that I may suffer or that my next of kin may suffer as a result of my volunteering in the activities of the field projects due to any cause whatsoever **including negligence, breach of contract, or breach of any statutory or other duty of care, including any duty of care owed under the OCCUPIERS LIABILITY ACT, R.S.B.C. 1996, C .337, ON THE PART OF THE RELEASEES;**
2. This Agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, assigns and representatives, in the event of my death or incapacity;
3. This Agreement shall be governed by and interpreted in accordance with the laws of the Province of British Columbia; and
4. Any litigation involving the parties to this Agreement shall be brought within the Province of British Columbia.

In entering into this Agreement, I am not relying upon any oral or written representations or statements made by the Releasees other than what is set forth in this Agreement.

**I have read and understand this Agreement and am aware that by signing this Agreement I am waiving certain legal rights which I or my heirs, next of kin, executors, administrators, assigns and representatives may have against the releasees.**

Signed on (Day, Month, Year) \_\_\_\_\_

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Please Print Name Clearly

\_\_\_\_\_  
Signature of Parent/Guardian if Volunteer under 18

\_\_\_\_\_  
Witness Please Print Name Clearly



## Media Release

Photography/Audiotape/Film Release Form  
(Optional)

**NAME:** \_\_\_\_\_

**Check one:**

- I am 18 years of age or older
- I am the parent or guardian of \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_

I understand that my photo, voice, or image may be used in the promotion of MakeWay Charitable Society – Atl'ka7tsem/Howe Sound Marine Stewardship Initiative. It may be published or used for any applications – in newspapers, newsletters, magazines, letters to donors, on the radio, in films, television commercials, posters, website, social media, or otherwise displayed to the public, or used for other educational, fundraising, information, or training purposes – either in whole or in part by MakeWay Charitable Society – Atl'ka7tsem/Howe Sound Marine Stewardship Initiative.

I agree to indemnify, defend and hold MakeWay Charitable Society – Atl'ka7tsem/Howe Sound Marine Stewardship Initiative, its sponsors, partners, and associates from any and all claims, suits, or liabilities arising from my (or the above-named child's) appearance in subsequent publications.

I fully acknowledge that my services have been donated and I hereby waive any fees for payments.

Signed on (Day, Month, Year) \_\_\_\_\_

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Please Print Name Clearly

\_\_\_\_\_  
Signature of Parent/Guardian if Volunteer under 18