



## Volunteer Waiver/Release Form

I hereby release, waive and discharge the Great Wall Chinese Academy, their volunteers, instructors, members, and all participants from any and all claims, losses, damages, causes of action, suits and liability of every kind, including all expenses of litigation, court costs, and attorney fees for injury to, or death of any person; or for damage to any property, arising from or attributed to, directly or indirectly, participation in any and all activities associated with the volunteer activity project \_\_\_\_\_ being held on \_\_\_\_\_. The undersigned further agrees to indemnify and hold harmless the organizers, participants and volunteers from all suits, causes of action, or claims of any type, brought as a result of participation in the above named activity.

I assume all risks of bodily injury to myself/or my minor child, and give permission for myself/him or her to be taken to a hospital and/or treated by licensed medical personnel for a medical emergency, illness, or injury; and for licensed medical staff to take emergency measures as they deem appropriate.

I have read this document and understand that it has legal consequences, and sign it voluntarily.

Participant's Printed Name: \_\_\_\_\_

Participant's Signature: \_\_\_\_\_

Parent/Guardian's Signature for minor age child (under the age of 18): \_\_\_\_\_

Date: \_\_\_\_\_

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### **Emergency Contact Form:**

Full Name of Volunteer: \_\_\_\_\_

Name of primary emergency contact: \_\_\_\_\_

Emergency Contact - Phone #: \_\_\_\_\_

Please list any known allergies or medical conditions:

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\_\_\_\_\_