

KDL Teen VOLUNTEER WAIVER

Update May 2023

You must complete this waiver before participating as a teen volunteer (age 14-18). Please have a parent or guardian also read and sign this form. Your volunteer user account will not be considered complete unless this waiver is signed.

Volunteer Release and Waiver of Liability Form

This Release and Waiver of Liability (the “release”) releases Kent District Library a nonprofit corporation, organized and existing under the laws of the State of Michigan, and each of its directors, officers, employees, and agents.

The Volunteer desires to provide volunteer services for KDL and engage in activities related to serving as a volunteer.

The Volunteer understands that the scope of Volunteer’s relationship with KDL is limited to a volunteer position and that no compensation is expected in return for services provided by Volunteer; that KDL 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 KDL.

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

Insurance: I understand that KDL 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 KDL beyond what may be offered freely by KDL in the event of injury or medical expenses incurred by me.

Medical Treatment: I hereby Release and forever discharge KDL 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 KDL.

Assumption of Risk: I understand that the services I provide to KDL may include activities that may be hazardous to me. As a volunteer, I hereby expressly assume risk of injury or harm from these activities and Release KDL from all liability.

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

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 Michigan and that this Release shall be governed by and interpreted in accordance with the laws of the State of Michigan. 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.

I will uphold the KDL core values, mission, purpose and the KDL policies (2.4, 6.14 and 6.14.1) as I perform volunteer services for KDL.

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

As the parent of the minor child, I hereby certify that he/she/they does not have a criminal background of violence, child abuse, criminal sexual contact, or drug related charges, pending or conviction.

Print Name of Volunteer _____

Signature of Volunteer _____

Print Name of Parent/Guardian _____

Signature of Parent/Guardian _____

Contact number or email _____

Date _____