

Volunteer Release Form

July 1, 2024 - June 30, 2025

If the volunteer is younger than 18, then the form must be signed by a parent or legal guardian.

One form can be used for multiple minors.

Volunteer's Name(s)	
10.0	
Email (adult if signing for	
' ' ' ' ' '	
minor)	
Age (Check one)	☐ Adult (18 or over)
' ' '	
	☐ Minor (under 18)—Form must be signed by a parent or legal guardian.
Date of Volunteer Event	

By participating in Every Meal activities, I understand and agree to the following for myself and/or the minor child(ren) named above (collectively referred to as "Volunteer"):

- Volunteer is participating in Every Meal activities as a volunteer and not as an employee.
- Volunteer assumes all risks and liabilities that may result from participation in Every Meal activities. Volunteer
 releases, forever discharges, and holds harmless Every Meal, its employees, representatives and agents from any
 and all causes of action, claims, demands and/or liabilities arising out of injury to or damage sustained by
 Volunteer.
- Volunteer agrees to indemnify Every Meal against any and all liability or loss, and against all claims or actions arising out of damage or injury to person or property caused by Volunteer.
- Volunteer recognizes that Every Meal has implemented preventative measures intended to reduce the spread of COVID-19 and other infectious diseases. This includes, but is not limited to strict compliance with Minnesota State-mandated requirements (e.g., masks, social distancing) where applicable. However, Every Meal cannot guarantee that you and/or the minor child(ren) named above will not become infected with COVID-19 or any other infectious disease. Volunteer hereby (a) acknowledges that the Volunteer has been informed of Every Meal's preventative measures and agrees to follow all such preventative measures, including those mandated by the State of Minnesota, and (b) voluntarily assumes the risk that the Volunteer and/or the minor child(ren) may be exposed to or infected by COVID-19 or another infectious disease while participating in volunteer activities at Every Meal.
- Volunteer recognizes that Every Meal and/or its authorized third parties may photograph, record, video and/or take statements from Volunteer while participating in Every Meal activities, all of which may be used to promote Every Meal programs. Volunteer hereby authorizes the taking of such photographs, video or statements and releases Every Meal and its authorized third parties from any claims associated with the use, publishing, display, exhibition, modification, adaptation or copying of such photographs, video and/or statements, including, without limitation, any claims arising under the right of publicity, right of privacy, or copyright law.
- By completing this form and signing below, Volunteer acknowledges that Volunteer, and/or the minor child(ren) named above, are 8 or more years of age.

Authorized Signature (Must be	
signed by a parent or legal guardian	
if volunteer is a minor)	
Name (please print)	
Date	