**Volunteer Liability Release Form**

**Volunteer agreement:**

I have agreed to work as a volunteer for the Lower Merion Conservancy and do so of my own free will. As a volunteer I am not an employee or agent of the Lower Merion Conservancy. I understand this role does not include compensation or payment of any kind. Furthermore, I acknowledge that the Lower Merion Conservancy does not offer health insurance, workers’ compensation insurance, or any such employee benefit to volunteers.

**Risk agreement:**

I fully recognize and accept that volunteering has risks and unforeseen dangers (such risks could be, but are not limited to: mental/emotional stress or physical injury). I have read the Job Description for the volunteer duties I am accepting and understand the minimum requirements. I understand that I have the right to review each activity prior to my participation and choose to participate of my own free will. I have read and understand the Lower Merion Conservancy’s mission statement and best practice procedures. I pledge to act and perform within those expectations.

**Waiver, release, hold harmless, and indemnification agreement:**

I acknowledge that the Lower Merion Conservancy does not guarantee safety. I voluntarily waive, release, and hold harmless the Lower Merion Conservancy, its board, employees, agents, and other volunteers from all claims, accidents, injuries, or death that result from actions related to my volunteer activities. I understand that this document disqualifies me from recovering damages against the Lower Merion Conservancy should I be injured in the course of my duties.

I shall defend, hold harmless, and indemnify the Lower Merion Conservancy, its board, employees, agents, and other volunteers from and against all claims, accusations, notices, judgments, rulings, liabilities, expenses, etc. that may exist as a result of my actions, inactions, errors, acts, or omissions.

**Acknowledgement and signatures:**

I have read and fully understand the above waiver. I understand that by signing this document I am giving up certain rights and accepting certain duties.

Volunteer Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_