

INDEMNIFICATION and RELEASE AGREEMENT for Authorized Volunteers

For and in consideration of receiving permission to perform certain volunteer activities for the Literacy Council of Washington County Inc (LCWC), the undersigned Volunteer agrees to indemnify and hold harmless LCWC from and against any and all claims, damages or loss, of whatever kind or nature, which arise out of or are in any manner connected with the Volunteer’s participation in the volunteer activities.

The Volunteer understands that the volunteer activities may involve risk of injury, loss or damage to the Volunteer, including but not limited to personal injury, sickness, disease or property damage. By signing this Agreement, Volunteer does hereby release and forever discharge LCWC, its officers, directors, employees, volunteers, advisors, property owners, sponsors, partners, agents, successors and assigns, from liability for any and all claims, damages or loss, including but not limited to claims involving personal injury, sickness, disease, property damage and other types of loss of any kind whatsoever, sustained by the Volunteer as a result of, or in any manner connected with, participation in volunteer activities for or on behalf of LCWC, whether such claims result from the negligent act or omission of LCWC, its agents, officers, or employees or any cause whatsoever.

The Volunteer certifies that he/she is able to perform the volunteer activities and that the Volunteer has his/her own health insurance. The Volunteer understands that LCWC does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health or disability insurance, in the event of injury or illness. The Volunteer certifies that he/she has not been convicted of, nor is he/she currently charged with any felony. The Volunteer understands and agrees that in the course of his/her volunteer activities, the Volunteer may be provided with information of a private, confidential or privileged nature. The Volunteer agrees not to disclose such private, confidential or privileged information without express written authorization from LCWC.

The Volunteer understands and agrees that this Agreement shall be governed by and construed in accordance with the laws of the State of Maryland. The Volunteer understands and agrees that this Agreement is intended to be as broad and inclusive as permitted by the laws of the State of Maryland, and therefore, in the event that any clause or provision of this Agreement shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Agreement, which shall continue to be enforceable.

Executed this _____ day of _____, 20_____, by the Volunteer whose name and signature appear below.

THE EXECUTION OF THIS AGREEMENT WAIVES ALL OF THE UNDERSIGNED’S RIGHTS TO MAKE ANY CLAIM WHATSOEVER AGAINST LCWC AND SHOULD NOT BE SIGNED UNTIL FULLY READ AND UNDERSTOOD.

Signature of LCWC Volunteer

Printed Name, Address, Phone of Volunteer